Department of Agriculture, Trade and Consumer Protection CP-121 (TRAC-433), 4/08 State of Wisconsin (WI Stat. 134.71) Bill 4225 Bill 4226

LICENSE APPLICATION

For

PAWNBOKER
SECONDHAND JEWELRY DEALER
SECONDHAND ARTICLE DEALER
SECONDHAND ARTICLE DEALER MARKET

Record Check Fee \$15 each person
Date:
FEIN#
Sellers Permit #
456-1026402986-09

	CHECK ALL THAT APPLY:						
	☑ Original application	Renewal					
TYPE:	☐ Pawnbroker \$500.00 ☑ Secondhand Article Dealer \$5	500.00	☑ Secondhand Jewelry Dealer \$500.00☑ Mall/Flea Market \$1,000.00				

INSTRUCTIONS:

INDIVIDUAL LICENSE – Complete Sections 1, 2, 3 and 6 PARTNERSHIP LICENSE – Complete Sections 1, 2, 3, 4 and 6 CORPORATE LICENSE – Complete Sections 1, 2, 3, 5, and 6

(SECTION 1) APPLICANT INFORMATION

Applicant Name (Last, First, MI)	Sex	Race	Date of Birth	Place of Birth (City & State)					
Feliciano-Vega Yailin	F	HISP		Marati, PR					
Street Address City		State	ZIP	Home Telephone Number					
2225 Harriet St Racine		1001	53404	(262)488-5w7					
(SECTION 2) CONVICTION RECORD									
Have you, or any other person listed on this application, been convicted of any of the following:									
A FELONY WITHIN THE LAST TEN (10) YEARS?		☐ YES	⊠ NO						
WITHIN THE LAST TEN (10) YEARS OF:									
a misdemeanor?			☐ YES	Ø NO					
a statutory violation punishable by fo	orfeitu	re?	☐ YES	Ø NO					
a county or municipal ordinance viol		☐ YES	⊠ NO						
For each "YES" response provide the date of arrest, the nature of the offense and conviction information:									
_									

(SECTION 3) BUSINESS INFORMATION							
Business Name	Street Address	City	State	ZIP	Telephone Number		
R&J'S	1817 State st	Racine	WI	53004	(262)577-58		
Owner's Name	Street Address	City	State	ZIP	Telephone Number		
Yailin Feliciano	225 Hamiets	Racine	WI	53404	26)488.50		
Business Manager's Name	Street Address	City	State	ZIP	Telephone Number		
		Name and the second of the sec	Parameter and	1			

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Building Owner's Name	Street Addre	200		City	State	ZIP	Telephon	e Number
			100		WI	53403	1	95-4
EXA Properties	LLU 60 /1	WISCON	Bin ave	Kalive	141	3210		(Over)
								, ,
	(SECT	ION 4)	PARTNE	RSHIP INFORMA	TION			
Partnership Name:								
.,								
List name, address, sex, race	and date of birth (D	7	DOB DOB	Street Address		ity /	State	ZIP
Name (Last, First, MI)	36/	Nace		Oli Cot Addi Cos				
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	ISEC	TION 5	CORPO	RATE INFORMA	TION	and leaves	angles area	A CONTRACT
Corporation Name:	10.20			/			State of	ion:
			\times				Incorporat	1011.
List name, address, sex, race	and data of high (F	10B) of all	compreties	officers and directors	Attach addit	onal sheets	s if necessar	ν.
List name, address, sex, race Name (Last, First, MI)	and date of birth (L		DOB	Street Address		City	State	Zip
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		/SECT	ION 6) PE	NALTY NOTICE				
				NALTY NOTICE				
I understand that this lice	cense may be d	enied or	revoked	for fraud, misrepr	esentation	or false si	ratement (contained
I understand that this lic in the application or for	cense may be d	enied or	revoked	for fraud, misrepr	esentation	or false si	atement (contained
in the application or for Under penalty of law, I:	any violation of swear that the i	enied or Wis. Sta	revoked ats. §§ 13	for fraud, misrepr 4.71, 943.34, 948 ed in this applicat	resentation of 3.62 or 948.	63. nd correc	ct to the b	est of my
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Date License Issued:

License # Issued:



WISCONSIN DEPARTMENT OF REVENUE PO BOX 8902 MADISON, WI 53708-8902

Contact Information:

2135 RIMROCK RD PO BOX 8902 MADISON, WI 53708-8902 ph: 608-266-2776 fax: 608-224-5761 email: DORBusinessTax@wisconsin.gov website: revenue.wi.gov

Letter ID

L2114427984

YAILIN FELICIANO-VEGA 2225 HARRIET ST RACINE WI 53404-2853

Wisconsin Department of Revenue Seller's Permit

Legal/real name:

YAILIN FELICIANO-VEGA

Business name:

R & J'S BUY & SELL 1817 STATE ST

RACINE WI 53404-2941

- This certificate confirms you are registered with the Wisconsin Department of Revenue and authorized in the business of selling tangible personal property and taxable services.
- You may not transfer this permit.
- This permit must be displayed at the place of business and is not valid at any other location.
- If your business is not operated from a fixed location, you must carry or display this
 permit at all events.

Tax Type

Account Type

Account Number

Sales & Use Tax

Seller's Permit

456-1026402986-04



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Contact Information:

2135 RIMROCK RD PO BOX 8902 MADISON, WI 53708-8902 ph: 608-266-2776 fax: 608-224-5761

1/13/2021

My Tax Account



Home

Settings

YAILIN FELICIANO-VEGA

Account

Account Settings

YAILIN FELICIANO-VEGA 27-3379332

BTR 600-1026402986-03

Access Level

: All Access

Change



Wisconsin Tax Account Lookup

Wisconsin Tax Account Lookup

Results

Legal Name	
YAILIN FELICIANO-VEGA	The state of the s
Account Type	
Sales & Use	
Account Number	
456-1026402986-04	***************************************
Filing Frequency	
Quarterly	~
Permit Status	
Valid	

Cancel

Previous

For your Facenty, this application times call after 15 minutes, All cosained information will be lost