



**CITY OF MILWAUKEE  
OFFICE OF THE CITY CLERK**

Wednesday, January 10, 2024

**COMMITTEE MEETING NOTICE**

AD 04

DEACON, Alciro D, Agent  
Mr. Jamerica LLC  
2132 N 33rd St  
Milwaukee, WI 53208

You are requested to attend a hearing which is to be held in Room 301-B, Third Floor, City Hall or you may attend virtually using the link below.

**Tuesday, January 23, 2024 at 09:10 AM**

The access code is <https://meet.goto.com/859644933>. If you wish to call in: **+1 (224) 501-3412** and use Access Code: **859-644-933**  
Please see the enclosed best practices document for further instructions.

**Regarding:** Your Extended Hours Establishments and Food Dealer License Applications Requesting To Close at 3AM on Fri & Sat as agent for "Mr. Jamerica LLC" for "Mr. Jamerica" at 733 N MILWAUKEE St #K103.

There is a possibility that your application may be denied for one or more of the following reasons. The recommendation of the committee regarding the application shall be based on evidence presented at the hearing. Per MCO 85-2.7-4, probative evidence concerning whether or not a new license should be granted may be presented on the following subjects: whether or not the applicant meets the municipal requirements, the appropriateness of the location and premises where the licensed premises is to be located and whether use of the premises for the purposes or activities permitted by the license would tend to facilitate a public or private nuisance or create undesirable neighborhood problems such as disorderly patrons, unreasonably loud noise, litter, and excessive traffic and parking congestion. Probative evidence relating to these matters may be taken from the plan of operation submitted with the license application, if any, but shall not include the content of any music. Evidence regarding the fitness of the location of the premises to be maintained as the principal place of business, including but not limited to whether there is an overconcentration of businesses of the type for which the license is sought; whether the proposal is consistent with any pertinent neighborhood business or development plans, or the location's proximity to areas where children are typically present. The applicant's record in operating similarly licensed premises; and whether or not the applicant has been charged with or convicted of any felony, misdemeanor, municipal offense or other offense, the circumstances of which substantially relate to the activity to be permitted by the license being applied for or any other factor which reasonably relates to the public health, safety or welfare may also be considered. See attached police report or correspondence.

**Notice for applicants with  
warrants or unpaid fines:**

**Proof of warrant satisfaction or payment of fines must be submitted at the hearing on the above date and time. Failure to comply with this requirement may result in a delay of the granting/denial of your application.**

Failure to appear at this meeting may result in the denial of your license. Individual applicants must appear only in person or by an attorney. Corporate or Limited Liability applicants must appear only by the agent designated on the application or by an attorney. Partnership applicants must appear by a partner listed on the application or by an attorney. If you wish to do so and at your own expense, you may be accompanied by an attorney of your choosing to represent you at this hearing. You will be given an opportunity to speak on behalf of the application and to respond and challenge any charges or reasons given for the denial. No petitions can be accepted by the committee, unless the people who signed the petition are present at the committee hearing and willing to testify. You may present witnesses under oath and you may also confront and cross-examine opposing witnesses under oath. If you have difficulty with the English language, you should bring an interpreter with you, at your expense, so that you can answer questions and participate in your hearing.

You may examine the application file at this office during regular business hours prior to the hearing date. Inquiries regarding this matter may be directed to the person whose signature appears below.

Limited parking for persons attending meetings during normal business hours is available at reduced rates (5 hour limit) at the Milwaukee Center on the southwest corner of Kilbourn Avenue and Water Street. You must present a copy of the meeting notice to the parking cashier.

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request this service, contact the Council Services Division ADA Coordinator at (414) 286-2998, Fax - (414) 286-3456, TDD - (414) 286-2025.

**JIM OWCZARSKI, CITY CLERK**

BY: \_\_\_\_\_

**Jim Cooney**  
License Division Manager

**If you have questions regarding this notice, please contact the License Division at (414) 286-2238.**

200 E. Wells Street, Room 105, City Hall, Milwaukee, WI 53202. [www.milwaukee.gov/license](http://www.milwaukee.gov/license)  
Phone: (414) 286-2238 Fax: (414) 286-3057 Email Address: [License@milwaukee.gov](mailto:License@milwaukee.gov)





Wednesday, January 10, 2024



# Notice of Public Hearing

Blank Notice

---

DEACON, Alciro D, Agent

Mr. Jamerica at 733 N MILWAUKEE St #K103

Extended Hours Establishments and Food Dealer License Applications Requesting To Close at  
3AM on Fri & Sat

**Tuesday, January 23, 2024 at 9:10 AM**

To whom it may concern:

The above application has been made by the above named applicant(s). This requires approval from the Licenses Committee and the Common Council of the City of Milwaukee. The hearing before the Licenses Committee will take place on 1/23/2024 at 9:10 AM in Room 301-B, Third Floor, City Hall. This is a public hearing. Those wishing to view the proceeding are able to do so via the City Channel – Channel 25 on Spectrum Cable – or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to provide oral testimony via phone or internet are asked to contact the staff assistant, Yadira Melendez at (414) 286-2775 or [stasst5@milwaukee.gov](mailto:stasst5@milwaukee.gov) for necessary information. Please make such requests no later than one business day prior to the start of the meeting. You are not required to attend the hearing, but please see the information below if you would like to provide testimony. Once the Licenses Committee makes its recommendation, this recommendation is forwarded to the full Common Council for approval at its next regularly scheduled hearing.

---

## **Important details for those wishing to provide information for the Licenses Committee to consider when making its recommendation:**

1. The license application is scheduled to be heard at the above time. Due to other hearings running longer than scheduled, you may have to wait some time to provide your testimony.
2. You must appear in person and testify as to matters that you have personally experienced or seen. (You cannot provide testimony for your neighbor, parent or anyone else; this is considered hearsay and cannot be considered by the committee.)
3. No letters or petitions can be accepted by the committee (unless the person who wrote the letter or the persons who signed the petition are present at the committee hearing and willing to testify).
4. Persons opposed to the license application are given the opportunity to testify first; supporters may testify after the opponents have finished.
5. When you are called to testify, you will be sworn in and asked to give your name, and address. (If your first and/or last names are uncommon please spell them.)
6. You may then provide testimony.
  - a. Include only information relating to the above license application.
  - b. Include only information you have personally witnessed or seen.
  - c. Provide concise and relevant information detailing how this business has affected or may affect the peaceful enjoyment of your neighborhood.
  - d. If by the time you have the opportunity to testify, the information you wish to share has already been provided to the committee, you may state that you agree with the previous testimony. Redundant or repetitive testimony will not assist the committee in making its recommendation.
7. After giving your testimony, the members of the Licenses Committee and the licensee may ask questions regarding the testimony you have given or other factors relating to the license application.
8. Business Competition is not a valid basis for denial or non-renewal of a license.  
**Please Note: If you have submitted an objection to the above application your objection cannot be considered by the committee unless you personally testify at the hearing.**



[illegible]



[illegible]



CURRENT OCCUPANT	758 N BROADWAY# 905	MILWAUKEE, WI 53202-3654
CURRENT OCCUPANT	758 N BROADWAY# 906	MILWAUKEE, WI 53202-4012
CURRENT OCCUPANT	758 N BROADWAY# 907	MILWAUKEE, WI 53202-4012
CURRENT OCCUPANT	758 N BROADWAY# 908	MILWAUKEE, WI 53202-4012
CURRENT OCCUPANT	758 N BROADWAY# 909	MILWAUKEE, WI 53202-4012
CURRENT OCCUPANT	758 N BROADWAY# 910	MILWAUKEE, WI 53202-3654
CURRENT OCCUPANT	758 N BROADWAY# 911	MILWAUKEE, WI 53202-4013

Blank Notice

Total Records: 100

Radius 250.0 feet and Center of the Circle: 733 N Milwaukee St



## BUSINESS LICENSE PLAN OF OPERATION

Office of the City Clerk License Division  
200 E. Wells St. Room 105, Milwaukee, WI 53202  
(414) 286-2238 www.milwaukee.gov/license e-mail address: license@milwaukee.gov

MILWAUKEE



## 1. Type of Business

Applying for: ☒ Extended Hours (12AM to 5AM) - If a food establishment, check all that apply: ☒ Delivery ☐ Drive Thru ☒ Dining Room ☐ Self Service Laundry ☐ Massage Establishment ☐ Filling Station ☐ Other (supplemental application for specific license also required)

Provide a detailed description of the type of business you plan on operating:

Ghost Kitchen. I cook the food. Uber eats delivers it. People pick up/dine in.  
Do you have any experience operating this type of business? ☒ No ☐ Yes If yes, explain: I worked at Cheesecake Factory

## 2. Business Operations

a. Proposed Opening Date: 12/01/23  
b. Is this premise under construction? ☒ No ☐ Yes If yes, list estimated completion date:  
c. Is this a franchise? ☒ No ☐ Yes  
d. Is this premises currently licensed? ☒ No ☐ Yes If yes, list type of license: Restaurant. Other restaurants are here.  
e. Is the current licensee operating? ☒ No ☐ Yes If no, list date closed:  
f. Do you have future plans for other businesses, licenses or permits at this location? ☒ No ☐ Yes If yes, explain:  
g. Have you previously held an Extended Hours License in Milwaukee? ☒ No ☐ Yes  
h. Are other businesses operating in the same building? ☒ No ☐ Yes If yes, describe: Other ghost kitchens

## 3. Litter &amp; Noise

a. How are grounds kept clean? ☒ Sweep ☐ Pressure Wash ☒ Pick Up Litter ☐ Other:  
b. How often will grounds be cleaned? ☒ Daily ☐ Weekly ☐ As Needed ☐ Monthly ☐ Other:  
c. Grounds cleaned by: ☒ Licensee ☒ Building Owner ☒ Employees ☒ Hired Maintenance ☐ Other:  
d. How are noise issues prevented and/or addressed? ☒ Security ☒ Manager approaches customer(s) ☐ Call Police ☐ Signs Posted ☐ Other:  
e. Will a sound amplification system be used? ☒ No ☐ Yes If yes, describe:

## 4. Smoking &amp; Sanitation

a. Are there designated outdoor smoking areas? ☒ No ☐ Yes If yes, describe:  
b. Number of Garbage Cans: Inside: 1 Locations: Kitchen 103 (my kitchen) Outside: 3 Locations: West side of building  
c. Is a crowd control barrier used? ☒ No ☐ Yes If yes, describe:  
d. How many restrooms are on the premises? 4  
e. Name of solid waste contractor: ☒ Advanced Disposal ☐ Waste Management ☒ Other:



## 5. Security

a. Are there onsite parking spaces? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_ and describe the parking security plan: \_\_\_\_\_

b. Is there a loading zone? ☐ No ☒ Yes If yes, describe the loading area security plan: \_\_\_\_\_

c. Will you have security personnel on premises? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_ and answer the following:

What are their responsibilities?

Is security equipment used? ☒ No ☐ Yes If yes, describe \_\_\_\_\_

List their licensing, certification, or training credentials \_\_\_\_\_

d. Will there be security cameras? ☒ No ☐ Yes If yes, how many? \_\_\_\_\_ and list locations: \_\_\_\_\_

e. Will searches/identification checks be done upon entry? ☒ No ☐ Yes If yes, describe \_\_\_\_\_

## 6. Percentage of Sales (must total 100%)

Alcohol _____%	Food <u>100</u> _____%	Secondhand Merchandise _____%	Precious Metals & Gems _____%
Entertainment _____%	Cigarettes _____%	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____%	Other _____%
Pawnbroker Activity _____%	Salvaged Materials (such as scrap metal) _____%	Personal Services (such as tattoo, body piercing, salon, tailor, tanning, etc.) _____%	Describe: _____

## 7. Businesses/Licenses on the Premises (check all that apply):

- Type 1 ☒ Full Service Restaurant ☐ Cafe/Coffee Shop ☐ Deli or Fast Food Restaurant ☐ Private/Fraternal/Veterans Club ☐ Night Club ☐ Tavern ☐ Cocktail Lounge ☐ Teen Club ☐ Banquet Hall ☐ Sports Facility ☐ Bowling Alley ☐ Hotel/Motel: Number of Floors: \_\_\_\_\_ Rooming House: \_\_\_\_\_ Number of Floors: \_\_\_\_\_ Number of Rooms: \_\_\_\_\_

## Type 2

- ☐ Liquor Store ☐ Corner Store ☐ Supermarket ☐ Convenience Store ☐ Gas Station ☐ Amusement/Phonograph Distributor ☐ Recycling, Salvage or Towing ☐ Used Car Dealer ☐ Personal Service Establishment (such as tattoo business, hair salon, tailor, etc.) ☐ Recording Studio

What other licenses/permits will you hold at this location? (check all that apply)

- ☒ Occupancy Permit ☐ Cigarette & Tobacco ☐ Gas Station ☐ Extended Hours ☐ Class "B" Tavern ☐ Weights & Measures ☐ Secondhand Dealer ☐ Precious Metal & Gem ☐ Other: \_\_\_\_\_

## 8. Legal Capacity (only if a Type 1 premises in #7 above)

Capacity \_\_\_\_\_ (Call the Milwaukee Development Center at 414-286-8211 if you have questions.)



## 9. Premises Description

- a. Identify all area(s) of the premises that will be used in operating this business (include areas used only for storage):  
☒ 1<sup>st</sup> Floor ☒ 2<sup>nd</sup> Floor ☒ Basement Storage ☐ Patio ☐ Beer Garden ☐ Sidewalk Café ☐ Deck ☐ Rooftop  
☐ Other: Describe: \_\_\_\_\_

b. Describe Location: ☒ Major Thoroughfare ☐ Secondary Street ☐ Other: \_\_\_\_\_

c. Nearest Major Cross Street: East Mason Street

d. Describe Building: ☒ Free Standing Building ☐ Strip Mall ☐ Other: \_\_\_\_\_

e. Describe Premises Structure: ☒ Single Story ☐ Multi-Story - # of Stories: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

f. Describe Surrounding Area: ☒ Commercial ☐ Residential ☐ Industrial ☐ Other: \_\_\_\_\_

g. Building Owner Name: Sam Cesare Phone Number: 773-365-1889

Building Owner Address: 733 N Milwaukee Street

## 10. Hours of Operation & Customers

Will customers be entering the premises? ☐ No ☒ Yes

Day of the Week	Proposed Hours of Operation:		Estimated Number of Customers expected each day	Potential Age Range of Customers	Class B Tavern Age Restriction Applicant Only: (if none, write 'None')
	Open Time (include a.m. or p.m.)	Close Time (include a.m. or p.m.)			
Sunday	2:30 pm	6:30 pm	600	12-100	
Monday	closed	closed	0	12-100	
Tuesday	10:30 AM	9:00 PM	450	12-100	
Wednesday	10:30 AM	9:00 PM	450	12-100	
Thursday	10:30 AM	9:00 PM	450	12-100	
Friday	10:30 AM	3:00 AM	600	12-100	
Saturday	12:00 PM	3:00 AM	800	12-100	

## 11. Signature(s)

Signature of Sole Proprietor, Partner, or 20% or more Shareholder

(If there are no 20% or more shareholders, Corporate Officer-print name/title and sign)

Signature of additional partner or 20% or more shareholder

See Application Information for a complete list of all required application forms.



## FOOD DEALER LICENSE PLAN OF OPERATION

OFFICE OF THE CITY CLERK, LICENSE DIVISION  
CITY HALL, 200 E. WELLS ST., ROOM 105, MILWAUKEE, WI 53202  
(414) 286-2238 • [license@milwaukee.gov](mailto:license@milwaukee.gov) • [www.milwaukee.gov/license](http://www.milwaukee.gov/license)



Legal Entity Name: <b>Mr. Jamerica LLC</b>	
Premises Address: <b>733 N Milwaukee St, Milwaukee, WI 53202</b>	
<b>SECTION 1 TYPE OF BUSINESS</b>	
<p>What will be the majority of your food sales? (check one)</p> <p><input checked="" type="checkbox"/> Restaurant items (meals):          MEALS include, but are not limited to, chicken, ribs, sandwiches, roasted corn, baked potatoes, hot dogs, brats, tacos, nachos w/ cheese and meat, French fries, cooked or deep fried vegetables/fruit, cooked cheese curds, corn dogs, egg rolls, salads.</p> <p><input type="checkbox"/> Retail items (snacks and beverages):          RETAIL items include, but are not limited to, ice cream/soft serve, lemonade, snow cones, coffee, espresso, cappuccino, tea, fruit juice, smoothies, candy, dispensed soda, fruit cups, bakery, cookies, kettle corn, cotton candy, funnel cakes, fritters, tortilla chips w/ cheese.</p> <p>Will it be a convenience store? <input type="checkbox"/> Yes <input type="checkbox"/> No          A convenience store contains less than 5,000 square feet of retail space and has, as its primary business, the sale of basic food items and in addition, sells household products or is a filling station that sells basic food items and household products.</p> <p><input type="checkbox"/> Bed &amp; Breakfast <input type="checkbox"/> Micro Market</p> <p>All Applicants: Submit a menu or a list of food items that will be sold.</p>	
<p>Will any wholesale business be done? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, what percentage of food sales will be wholesale?</p> <p><input type="checkbox"/> Less than 25% <input type="checkbox"/> 25% or More AND:  <input type="checkbox"/> Restaurant items (meals) will be sold – Complete this application and also contact DATCP.  <input type="checkbox"/> NO restaurant items (meals) will be sold - Do NOT complete this application. Contact DATCP only.</p>	
<b>SECTION 2 FOOD PROCESSING</b>	
<p>Will any food processing be done? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p> <p>Processing is defined as assembling, grinding, cutting, mixing, baking, coating, stuffing, packing, bottling, grilling, canning, extracting, fermenting, distilling, pickling, freezing, drying, smoking, or packaging.</p>	
<b>SECTION 3 FOOD REQUIRING TEMPERATURE CONTROL</b>	
<p>Will any food that requires temperature control be sold? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes          (includes dairy products such as milk, cheese, and ice cream, fish, shellfish, meat, poultry)</p> <p>If yes, list the types of food items: <b>Poultry, Beef, Goat, Pork</b></p>	



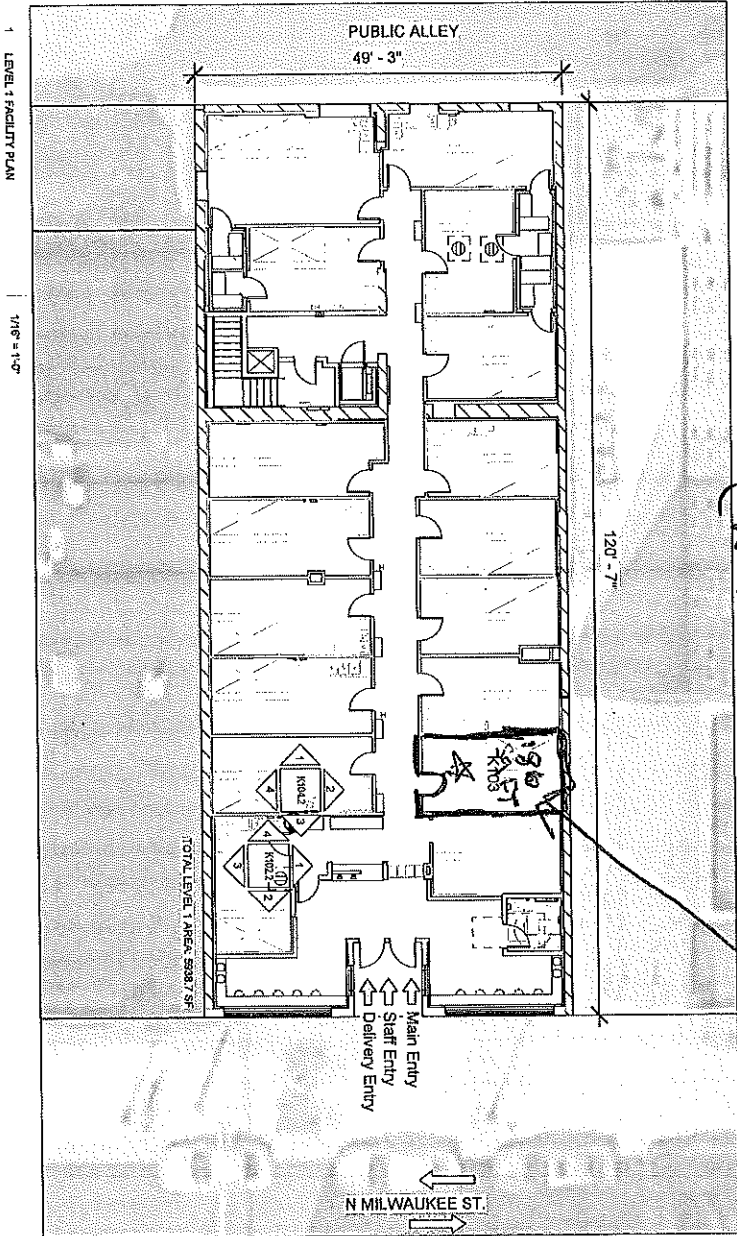
<p><b>SECTION 4 DETAILS OF OPERATION</b></p> <p>Will you have seating on site for dining? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will you be doing any catering? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will you be doing any delivery? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will you have outdoor activities? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will you have a drive thru window? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes, provide drive thru hours: _____</p> <p>Will scales or barcode scanners be used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Yes - You must also apply for a Weights &amp; Measures License.</p>	<p><b>SECTION 5 ADDITIONAL SITES</b></p> <p>Where will food be prepared and/or sold?</p> <p><input checked="" type="checkbox"/> At a single site <input type="checkbox"/> At multiple sites: How many? _____ (for example, a hotel with several dining rooms or bars)</p> <p>If multiple sites, attach a Food Dealer Additional Site Addendum (ccf-foodadd) for each additional site.</p>
<p><b>SECTION 6 CONSTRUCTION OR CHANGES</b></p>	
<p>Are you planning any construction, remodeling or equipment changes?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, SKIP to Section 8</p> <p>If Yes, check all that apply:</p> <p><input type="checkbox"/> New construction of a building <input type="checkbox"/> Renovation or remodeling <input checked="" type="checkbox"/> Equipment changes only</p> <p>Provide a brief description of the changes: _____</p> <p>Start date: _____</p> <p>Name, Address &amp; Phone Number of Architect: _____</p> <p>Name, Address &amp; Phone Number of Contractor: _____</p>	
<p><b>SECTION 7 ALCOHOL BEVERAGES</b></p>	
<p>Are you applying for an alcohol beverage license?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If No, SKIP to Section 8</p> <p>If Yes, if your food license is approved prior to the alcohol license, when do you want the food license issued?</p> <p><input type="checkbox"/> Immediately <input type="checkbox"/> At the same time as the alcohol license</p>	
<p><b>SECTION 8 ACKNOWLEDGEMENTS &amp; SIGNATURE</b></p>	
<p>You must initial each item confirming your understanding:</p> <p>I understand the Health Department must conduct an inspection and advise the License Division of their approval before the license may be issued.</p> <p>I understand I must obtain an occupancy permit from the Department of Neighborhood Services and an inspection may be required. Neighborhood Services must advise the License Division of their approval before the license may be issued.</p> <p>I understand the district alderperson will review and either support or object to my application. If he/she objects, I may appeal and be scheduled to appear before the Licenses Committee. The Licenses Committee will then make a recommendation to the Common Council. The Common Council must grant the license before it may be issued.</p> <p>I understand proof of payment for all license fees must be on file in the License Division before the license may be issued and the license must be issued and posted in my establishment prior to opening for business.</p> <p>I will not operate my food business until the license has been issued and posted in the establishment.</p>	
<p>Signature of Sole Proprietor, Partner, or 20% Shareholder: _____</p> <p>Signature of Additional Partner: _____</p>	



~~My Space~~, Kitchen 103 = 186 SA FT  
The entire facility is 5938.7 square feet

(N↑)

my space



KITCHEN 103

733 N MILWAUKEE STREET, MILWAUKEE, WI 53202

Mr. Jamerica

11/02/23

operating as Mr. Jamerica

Alejo Deaton

K103.2

DRAWN BY: JG CHECKED BY:

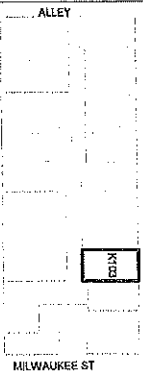
REVISION HISTORY

Δ DESCRIPTION	DATE
52 KOB DRAWINGS TO	5/11/2023
56 KOB DRAWINGS TO	10/2/2020

SYMBOL LEGEND

ADA Door Clearance	Electrical Panel
Door Outlet	Acid Pull
Door Inlet	Fry Alarm Bell
High-Voltage Outlet	Fry Station
Junction Box (Blank Panel)	Fry Extender
Door Outlet (Falling)	BUS Street
Light Switch	Data Port
GFCI Power Switch	Waste Access Point with Data Port
Recessed	Floor Drain
Gas Connection	Gas Connection w/ Tie
Water Line - Domestic	Water Line - Hot Water
Ceiling Mounted Camera	Wall Mounted Camera
AP = Above Ceiling Floor	RF = Rafter Floor

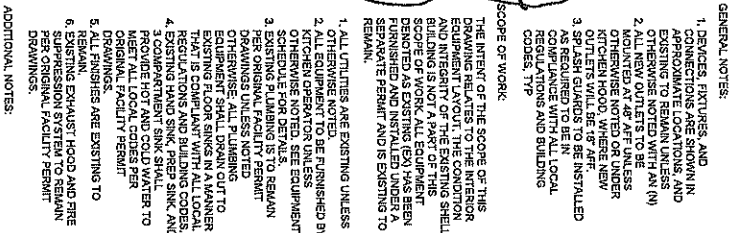
KEY PLAN



1 NORTH

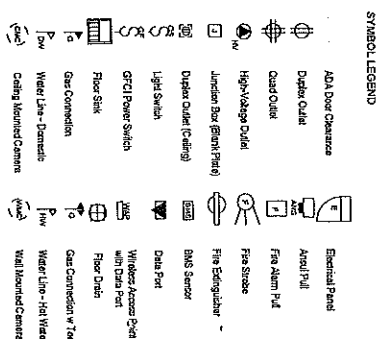


27

**KITCHEN 103**

Mr. Jamerica LLC  
11/02/23

Operating as Mr. Jamerica  
Alvin Deacon



REVISION HISTORY	
DATE	DESCRIPTION
9/11/2023	52 KCB DRAWINGS NO
10/6/2023	55 KCB DRAWINGS V1

DRAWN BY:	JG	CHECKED BY:
-----------	----	-------------



MR JAMERICA MENU

JAMAICAN CURRY CHICKEN

(Mr. Jamaica's specialty. Served with Rice & Peas, Steam Cabbage, and plantain)

13.95 Regular

15.95 Large

CRISPY JAMAICAN JERK CHICKEN WONTONS

*If you like Jerk chicken eggrolls, You'll LOVE these.*

**\*BEST SELLER!!**

3 for 2.50

6 for 4.75

*(\*Get 1 order of 6 for 4.00 when ordered with any dish)*

9 for 7.95

12 for 9.50

15 for 10.50

Jamaican Jerk Chicken Eggrolls

1 for 4.95

2 for 8.00

JAMAICAN JERK CHICKEN

(Served with Rice & Peas with Steam Cabbage)

14.95 Regular

16.95 Large



**JAMAICAN BROWN STEW CHICKEN**

(Served with Rice & Peas, Steam Cabbage, and plantain)

14.95 Regular

16.95 Large

**JAMAICAN OXTAIL**

(Served with Rice & Peas, Steam Cabbage, and plantain \*Dish Contains beef neckbones as well)

24.95 Regular

26.95 Large

**Jamaican Beef Patty**

3.95

**JAMAICAN CURRY GOAT**

(Served with Rice & Peas, Steam Cabbage, and plantain)

19.95 Regular

23.95 Large

**BEST TURKEY LEG EVER!**

(Fried and served with French fries)

14.95

**BEST PORK CHOPS EVER!**

(Baked Pork Chop (Served with Rice & Peas, Steam Cabbage, and plantain)

13.95 Regular



14.95 Large

CARMEL CAKE!

6.95 per slice

SWEET POTATO PIE

5.25 per slice

SIDES

Rice and Peas 5.00

White Rice 5.00

Steam Cabbage 5.00

French Fries 4.00