

November 7, 1985

LaBarbacoa Steak & Burger Corp. 1731 University Avenue Bronx, New York 10453

Gentlemen:

Please take notice of the Default Order of the State Tax Commission enclosed herewith.

Please take further notice that pursuant to Section(s) 1138 of the Tax Law, any proceeding in court to review this decision must be commenced within 4 months from the date of this notice.

Inquiries concerning the computation of tax due or refund allowed in accordance with this decision may be addressed to the undersigned at the above address.

Very truly yours, Joseph Chyrywad Supervisor of Tax Conferences

cc: Petitioner's Representative Manuel Vidal 333 East 138th Street Bronx, NY 10454 Taxing Bureau's Representative

STATE OF NEW YORK STATE TAX COMMISSION

In the Matter of the Petition	:	
of	:	
LaBarbacoa Steak & Burger Corp.	:	DEFAULT ORDER
	:	85-C-27
for Redetermination of a Deficiency or Revision	:	
of a Determination or Refund of Sales & Use Tax	:	
under Article 28 & 29 of the Tax Law for the	:	
Period 12/1/81 - 8/31/84.	:	

Petitioner(s) LaBarbacoa Steak & Burger Corp. filed a petition for redetermination of a deficiency or revision of a determination or refund of Sales & Use Tax under Article 28 & 29 of the Tax Law for the Period 12/1/81 -8/31/84. File No. 57661.

A pre-hearing conference on the petition was scheduled before Lance Sonners, at the offices of the State Tax Commission, Two World Trade Center, Room 65-51, New York, New York 10047 on Tuesday, August 20, 1985 at 4:00 p.m. Notice of said pre-hearing conference was given to petitioner(s) and the representative of petitioner(s). Petitioner(s) did not appear at the pre-hearing conference. A default has been duly noted.

Now on motion of the State Tax Commission, it is

ORDERED that the petition of LaBarbacoa Steak & Burger Corp. be and the same is hereby denied.

DEFAULT ORDER ADOPTED BY THE STATE TAX COMMISSION ALBANY, NEW YORK NOVEMBER 7, 1985

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RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

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1982 *	Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to whom and Date Delivered Return receipt showing to whom, Date, and Address of Delivery		
PS Form 3800, Feb.	TOTAL Postage and Fees Postmark or Date	\$	

P 042 704 785 **RECEIPT FOR CERTIFIED MAIL** NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse) . * U.S.G.P.O. 1984-446-014 Se and No Stre State and ZIP Code P/Q \$ Postage Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to whom and Date Delivered Return receipt showing to whom, Date, and Address of Delivery Feb. 1982 \$ TOTAL Postage and Fees PS Form 3800, Postmark or Date