

# NEVADA STATE BOARD OF MASSAGE THERAPY

## AGENDA ACTION SHEET

**TITLE:** Application Review (Education or Administrative)

**MEETING DATE:** March 22, 2023

**APPLICANT:** Meixiang Yang

**REVIEW UNDER:** NRS 640C.700

### BACKGROUND INFORMATION:

Ms. Yang's massage application is before you today for review that could not be approved administratively. Ms. Yang was previously before the Board for discipline for soliciting prostitution while performing massage on an undercover Las Vegas Metropolitan Police Officer at Mei Li Massage. Ms. Yang accepted a voluntary surrender in lieu of other discipline. The Board approved the three (3) year voluntary surrender on October 30, 2019. Ms. Yang is requesting to be granted a license under NRS 640C.580 and is before you today for review under NRS 640C.700.

### ACTION:

- ☐ Approved
- ☐ Probation – NRS 640C.700(2)(4)(6)(9) and NAC 640C.410(1)(r)
- ☐ Denied – NRS 640C.700(2)(4)(6)(9) and NAC 640C.410(1)(r)
- ☐ Tabled

### PROBATION CONDITIONS: Per NRS 640C.710 Options for Respondent:

<input type="checkbox"/> A. Report all contact with law enforcement personnel within 48 hours after such contact occurs.	<input type="checkbox"/> B. Refrain from providing outcall services.
<input type="checkbox"/> C. Submit employment offers to the staff of the Board for review and approval.	<input type="checkbox"/> D. Submit to a random drug test at respondent's expense.
<input type="checkbox"/> E. Complete an ethics course of _____ CEU hours within 90 calendar days of licensure.	<input type="checkbox"/> F. Submit to the Board a complete set of Fingerprints bi-annually/annually at licensee's expense.
<input type="checkbox"/> G. Take any other action that the Board deems appropriate -	

### Required for Respondent:

Cooperate fully with Board staff to administrate term of probation.	Responsible for all administrative fees incurred by the Board as a result of their probation compliance
Attend Probation Orientation	Comply with all laws governing massage therapy
Notify any change in address, phone number, establishment or employment to the Board office within 10 calendar days per NAC.640C.085(3)	Take any combination of the actions set forth in paragraphs (a) through (g), inclusive.



# Nevada State Board of Massage Therapy

1755 E. Plumb Lane, Suite 252, Reno, NEVADA

Application: License Application  
Application Number: OL221207061039

Fee: \$30.00

## APPLICATION INSTRUCTIONS

Please read the following instructions carefully before completing the application. Incomplete applications will cause delays in processing your application. If you have any questions about completing this application, visit our website listed above and click the FAQs tab.

1. Did you complete/graduate from a program of Massage Therapy with at least 550 hours? : ☒ Yes ☐ No
2. Did you take and pass the National Exam (NESL, NCETM, NCETMB, MBLEx, IASI, ITEC, ARCB, IIR and NCBTMB-R)? : ☒ Yes ☐ No

## Section 1 : Personal Information

- Include 1 current passport quality photo - No emailed photos or faxes will be accepted
- No larger than 2" x 2", front view of FACE - no profile
- Must be taken against a solid white background
- We will **NOT ACCEPT** the photo if you are wearing a hat, sunglasses, or anything obstructing any portion of your face.

Application Type : ☒ Massage Therapist ☐ Structural Integration ☐ Reflexology

### Applicant Name

Last Name : YANG

First Name : MEIXIANG

Middle Name :



List all legal names previously or currently being used by you :

No record found.

Mailing address :

Street :

City :

State :

Zip :

Residence address (If different than the mailing address) : ☐ Same as mailing address

Street :

City :

State : NV

Zip :

Social Security Number :

Date of Birth :

Place of Birth : CHINA

Gender : ☒ Male ☐ Female

Home/Cell Phone :

Indicate the appropriate selection; which address you would prefer to be public knowledge.

☐ Home ☒ Mailing ☐ Business

Do you want to be excluded from the public mailing list? (Select one - You will still receive Board

**notifications)**

☐ Yes ☒ No

**Section 2 : Child Support Information (Pursuant to NRS 640C.430)**

Mark the appropriate response (failure to mark one of the three will result in denial of your application):

- ☒ I am NOT SUBJECT to a court order for the support of a child.
- ☐ I am SUBJECT to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order.
- ☐ I am SUBJECT to a court order for the support of one or more children and am NOT in compliance with the order or am NOT in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order.

**Section 3 : Previous Licensure Information****Previous Licensure :**

List all jurisdictions/states in which you have ever been licensed as a Massage Therapist, Reflexology or Structural Integrationist.

- ☒ Check here if you have never been licensed in any state jurisdiction.

Licensure information is not required because you have checked "Sign off from Local jurisdiction to follow".

**Section 4 : Training and Education****Training :**

Contact registrar of your school/(s) and request to have official transcripts mailed directly to the Nevada State Board of Massage Therapy.

Diploma may be provided by school or applicant.

Name of School	City/State	Years from and to	Hours Completed
FUZUBA SCHOOL OF MASSAGE AND REFLEXOLOGY	LAS VEGAS	2015 - 2015	500

**Transcript(s)**

Document Name	User Defined Document Name	Document Link
OL221207061039-205879-Transcript.pdf	FUZUBA-TRANSCP	<a href="#">Document Detail</a>

**Section 5 : National Exam**

Exam Taken	Where Taken	Date Taken
MBLEX	Las Vegas/Nevada	06/27/2015

National Exam Status :

Date Received :

Score Report Received ☒

Document Name	User Defined Document Name	Document Status
OL221207061039-205880-ScoreReportCard.pdf	MBLEX	Pass

## Section 6 : Application Screening Questions

Please review the information you provided on this page carefully before submitting. Once saved and submitted, this cannot be changed.

1. Have you ever had any disciplinary proceedings instituted against you relating to your license to practice massage, reflexology or structural integration?

☐ Yes ☒ No

If yes, add the disciplinary actions below.

No record found.

2. Are you currently a party to any pending litigation related to the practice of massage therapy, reflexology or structural integration? If yes, please indicate whether you are a plaintiff or defendant and describe the nature of the litigation.

☐ Yes ☒ No

3. Are you currently or have you ever been required to register as a Sex Offender? (Tier I, II or III)

☐ Yes ☒ No

If Yes, please explain in below textbox :

4. Have you been accused of, arrested for, engaged in or solicited sexual activity during the course of practicing massage, reflexology, or structural integration on a person, with or without the consent of the person, including, without limitation, if you were an applicant or holder of a license:

- (a) Made sexual advances toward the person;
- (b) Requested sexual favors from the person; or
- (c) Massaged, touched or applied any instrument to the breasts of the person, unless the person had signed a written consent form provided by the Board;

☒ Yes ☐ No

If yes, fill in the following with complete and accurate information for each accusation or arrest:

Date of Charge	Law Enforcement Agency Detail	Charge	Disposition
01/02/2019	Clark County Pretrial Services	Solicit/engage in prostit	voluntary surrender license

## Fingerprint Background Waiver

### NOTICE OF NONCRIMINAL JUSTICE APPLICANT'S RIGHTS

As an applicant who is the subject of a Federal Bureau of Investigation (FBI) fingerprint-based criminal history record check for a noncriminal justice purpose you have certain rights which are discussed below.

1. You must be notified by the Nevada State Board of Massage Therapy that your fingerprints will be used to check the criminal history records of the FBI and the State of Nevada.
2. If you have a criminal history record, the officials making a determination of your suitability for the job, license or other benefit for which you are applying must provide you the opportunity to complete or challenge the accuracy of the information in the record. You may review and challenge the accuracy of any and all criminal history records which are returned to the submitting agency. The proper forms and procedures will be furnished to you by the Nevada Department of Public Safety, Records Bureau upon request. If you decide to challenge the accuracy or completeness of your FBI criminal history record, Title 28 of the Code of Federal Regulations Section 16.34 provides for the proper procedure to do so:

**16.34 - Procedure to obtain change, correction or updating of identification records.** If, after reviewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wishes changes, corrections or updating of the alleged deficiency, he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division, ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct

the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency.

3. Based on 28 CFR § 50.12 (b), officials making such determinations should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
4. You have the right to expect that officials receiving the results of the fingerprint-based criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal or state statute, regulation or executive order; or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.
5. I hereby authorize **Nevada State Board of Massage Therapy** to submit a set of my fingerprints to the Nevada Department of Public Safety, Records Bureau for the purpose of accessing and reviewing State of Nevada and FBI criminal history records that may pertain to me.  
In giving this authorization, I expressly understand that the records may include information pertaining to notations of arrest, detentions, indictments, information or other charges for which the final court disposition is pending or is unknown to the above referenced agency. For records containing final court disposition information, I understand that the release may include information pertaining to dismissals, acquittals, convictions, sentences, correctional supervision information and information concerning the status of my parole or probation when applicable.
6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.

In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

**Last Name :** YANG

**First Name :** MEIXIANG

**Middle Name :**

**Street :**

**City :**

**State :**

**Zip :**

**Date :** 12/25/2022

**Submitting Agency :** Nevada State Board of Massage  
Therapy

**Address :** 1755 E. Plumb Ln. Suite 252,  
Reno, NV 89502

#### VETERAN

The Nevada State Board of Massage Therapy is required by State Law to report veteran information annually. If this section applies to you, please complete the following information.

**Have you ever served in the military:** ☐ Yes ☒ No

**Branch(es) of Service:** (Check all that apply)

- ☐ Army/Army Reserve
- ☐ Marine Corps/Marine Corps Reserve
- ☐ Navy/Navy Reserve
- ☐ Air Force/Air Force Reserve
- ☐ Coast Guard/Coast Guard Reserve
- ☐ National Guard

**Military Occupation Specialty/Specialities:**

**Date(s) of Service:** From To

As by Executive Order 2014-20 all professional licensing board organized pursuant to the NRS shall collect the above data and provide the information to the Nevada Department of Veterans Services.

#### Affidavit of Applicant / Authorization of Release

I, **MEIXIANG YANG** certify that I am the person described and identified in this application;  
I have answered all the questions truthfully and completely, and any documents that I have provided in support of my application are, to the best of my knowledge, accurate.  
I certify that I have not had any undisclosed disciplinary proceedings instituted against me relating to my license to practice massage, reflexology or structural integration and I have disclosed or have not been arrested or convicted, for

any crime involving violence, prostitution or any other sexual offense.

I authorize all institutions or organizations, including educational institutions and organizations, employers (past and present), business and professional associations (past and present) and all governmental agencies and municipalities (local, state, federal and foreign) to release to the Nevada State Board of Massage Therapy any information, files or records required by the Nevada State Board of Massage Therapy in connection with processing this application.

I understand that furnishing false or misleading information or failing to furnish required information on this application may be cause for the denial, suspension or revocation of my license to practice massage therapy, structural integration or reflexology in the State of Nevada.

Name : MEIXIANG YANG

Date : 12/25/2022

#### Upload

Have you uploaded a current passport quality photo?

Has our office received your Official School Transcripts, Certificate of Completion (diploma), National Exam Official Score Report and, if applicable, Certified Statement from other jurisdictions/states?

☒ Yes ☐ No

Have you uploaded a current copy of driver's license or identification card and social security card. Names must match on driver's license and social security card. If your license has expired since you submitted your application you must include a current legible copy?

☒ Yes ☐ No

Have you uploaded a current massage therapy license, reflexology license/certificate or structural integration license. If your current massage therapist license, reflexology license/certificate or structural integration license has expired since you submitted your application you must include a current legible copy?

☐ Yes ☒ No

- Please allow up to 4 weeks for processing your live scan fingerprints
- Please allow up to 6-8 weeks for processing fingerprint cards
- **Once you have submitted your completed application, please allow up to 15 business days for processing before inquiring about the status of your application.**

Document Type	Document Name	User Defined Document Name
Score Report Card	OL221207061039-205880-ScoreReportCard.pdf	MBLEX
Transcript	OL221207061039-205879-Transcript.pdf	FUZUBA-TRANSCP
Certificate of Completion	221207061039-204210-Certificate-of-Completion.jpg	certification
Photo	9662-204192-YANG, MEIXIANG.jpg	
Social Security Card	OL221207045038-202503-Social-Security-Card.jpg	SSN
Government Issued ID Card	OL221207045038-202502-Government-Issued-ID-Card.jpg	ID

#### Application Fees

All fees are non-refundable.

#### Fee Detail(s)

#### Payment Detail(s)

Payment Method:

Amount Paid:





# OFFICIAL TRANSCRIPT

## Professional Practice of Massage (500-Hour Course)

STUDENT NAME: Yang, Meixiang GENDER: Female  
 DATE OF BIRTH: \_\_\_\_\_ ID: 1603173076  
 START DATE: 01/19/2015 COMPLETION DATE: 04/30/2015

<u>UNIT</u>	<u>SUBJECT</u>	<u>HOURS</u>	<u>GRADE</u>
A.	<u>Human Anatomy, Physiology and Kinesiology</u> - Anatomy 50 Hours - Physiology 35 Hours - Kinesiology 40 Hours	125 Hours	C-
B.	<u>Theory and Practice of Massage</u> - includes Swedish/Western Massage history, theory and methods (125 hours); client assessment (25 hours); clinical and relaxation massage methods (50 hours); and hands-on practice (50 hours)	250 Hours	B-
C.	<u>Pathology for Massage Therapists</u> - includes cautions, contraindications and endangerment sites (20 hours); as well as massage (20 hours) and hydrotherapy (20 hours) protocols specific to commonly seen disorders, injuries and client needs	60 Hours	C+
D.	<u>Standards of Professional Practice</u> - includes health and hygiene (20 hours), legal issues, ethics, taxation, standard business practices, new client intake, charting and referral to professionals in other disciplines (45 hours)	65 Hours	C-

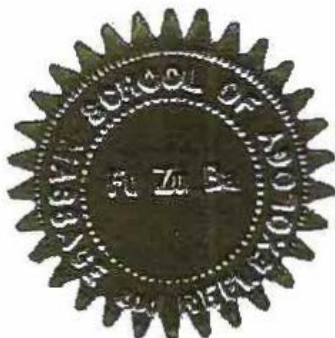
TOTAL HOURS: 500

FINAL GRADE: C

Qian Yang, CMT, Assistant Director

Date: 04-30-15

NSBMT  
 JUL 06 2015  
 Received



**FuZuBa**  
SCHOOL OF  
**Massage Reflexology**



**Certificate of Graduation**


I hereby certify that Yang, Meixiang having successfully completed the 500-hour course in Professional Practice of Therapeutic Massage, is hereby awarded the Certificate of Graduation this Thirtieth day of April, 2015 with all the rights and responsibilities thereto attached.

NSBMT

JUL 06 2015

Received



  
**Qian (Chelsea) Yang**  
Director





# FSMTB

FEDERATION OF STATE  
MASSAGE THERAPY BOARDS

NSBMT

JUL 29 2015

Received

## MBLEx Jurisdictional Score Report and Transfer Grade Roster

State: Nevada

### Transfer Grade Roster

<u>LastName</u>	<u>First Name</u>	<u>Last four SS#</u>	<u>DOB</u>	<u>Exam Date</u>	<u>Attempt</u>	<u>Score</u>	<u>Pass/Fail</u>	<u>Language</u>	<u>School</u>
Yang	Meixiang			06/27/15	1	734	Pass	English	Fu Zu Ba School of Reflexology



**Nevada State Board of Massage Therapy**

1755 E. Plumb Lane Suite 252

Reno, NV 89502

Phone (775) 687-9955

Fax (775) 786-4264

Email: [nvmassagebd@lmt.nv.gov](mailto:nvmassagebd@lmt.nv.gov)

Website: <http://massagetherapy.nv.gov>

February 21, 2023

Meixiang Yang

Re: Notice of meeting of the Nevada State Board of Massage Therapy to consider your character, alleged misconduct, competence, or physical or mental health.

Dear Ms. Yang:

In connection with your Application Review, the Nevada State Board of Massage Therapy (Board) may consider your character, alleged misconduct, competence or physical or mental health at its meeting on March 22, 2023. There will be no physical location for this meeting. Participants can join the meeting via Zoom. The meeting will begin at 9:00 a.m:

Zoom sign-in available at 8:30 a.m.

Register in advance:

<https://us06web.zoom.us/j/85370113332?pwd=UnV1bFcvUWgxTElZYzJlVbJdJkMrZz09>

Meeting ID: 853 70113332

Password: 244142

Dial by your location

+1 253 215 8782 US (Tacoma)

+1 846 248 7799 US (Houston)

+1 669 900 6833 US (San Jose)

+1 801 715 8592 US (Washington DC)

+1 312 626 6799 US (Chicago)

+1 929 205 6099 US (New York)


The meeting is a public meeting. You are not required to attend; however, attendance is recommended. Pursuant to NAC 640C.070 your completed investigation results may be discussed. You may choose to have an attorney or other representative of your choosing present during the meeting, present written evidence, provide testimony, present witnesses relating to your character, alleged misconduct, professional competence, or physical or mental health. Please be aware you are one of many agenda items, and the Board may take items out of order.

If the Board determines it necessary, after considering your character, alleged misconduct, professional competence, or physical or mental health whether in a closed meeting or open meeting, it may take administrative action against you at this meeting. This informational statement is in lieu of any notice that may be required pursuant to NRS 241.034. This notice is provided to you under NRS 241.033.

In the event you need an interpreter, please provide one at your own expense.

If you have any questions, please feel free to contact the office at (775) 687-9955.

Sincerely,



Sandra J. Anderson  
Executive Director

9489 0090 0027 6447 8866 61



**Nevada State Board of Massage Therapy**

1755 E. Plumb Lane Suite 252

Reno, NV 89502

Reno Phone (775) 687-9955

Fax (775) 786-4264

Email: [nvmassagebd@state.nv.us](mailto:nvmassagebd@state.nv.us)

Website: <http://massagetherapy.nv.gov>

October 31, 2019

Kirk T. Kennedy, Esq.  
815 S. Casino Center Blvd.  
Las Vegas, NV 89101

RE: Board Meeting October 30, 2019 – Meixiang Yang

Dear Mr. Kennedy:

Ms. Yang's voluntary surrender of license in lieu of other disciplinary action was approved at the October 30, 2019, Board Meeting.

Note: Under NRS 640C.910 It is a misdemeanor to practice Massage Therapy without a license or to hold yourself out as a Massage Therapist.

Please request Ms. Yang to return all three portions of her license bearing the number NVMT.7696 as soon as possible.

Per the terms of the voluntary surrender Ms. Yang is unable to reapply for licensure for a minimum of three (3) years.

If you have any questions, please email our office at [nvmassagebd@state.nv.us](mailto:nvmassagebd@state.nv.us)

Sincerely,

A handwritten signature in blue ink, appearing to read "Tereza Van Horn".

Tereza Van Horn  
Executive Assistant  
NSBMT

COPY



BEFORE THE NEVADA STATE BOARD OF  
MASSAGE THERAPY

In the Matter of:

Melxiang Yang,

Licensed Massage Therapist  
Nevada License No. NVMT.7696,

Respondent.

Case No. NVMT-C-1907

**VOLUNTARY SURRENDER  
IN LIEU OF OTHER DISCIPLINE**

Case No. NVMT-C-1907

I, Meixiang Yang, wish to voluntarily surrender my Nevada Massage Therapy License.

1. It is alleged that:

a. On or about January 2, 2019, while working at Las Vegas Massage located at 2470 E. Tropicana Ave. #F, Las Vegas, Nevada 89121, I was arrested for soliciting sexual activity to an undercover police officer during the course of practicing massage.

2. I admit only that these factual allegations may constitute grounds for disciplinary action pursuant to NRS 640C.710 because the conduct may have violated NRS 640C.700(2)(4)(6)(9) and/or (10).

3. I am aware of, understand, and have been advised of the effect of this Voluntary Surrender.

4. I have read this Voluntary Surrender and I fully understand and acknowledge its facts and terms.

5. I am aware that I have certain constitutional rights, including:

- (a) I have the right to hire an attorney to represent me in this proceeding;
- (b) I have the right to demand a hearing on the charges against me, and I can require the Board's staff to prove the allegations;
- (c) I have the right to cross-examine the witnesses against me;
- (d) I have the right to call witnesses to provide evidence on my own behalf;
- (e) I have other rights accorded to me under the Nevada Revised Statutes Chapters 233B, 622, 622A and 640C.

(f) I have the right to obtain judicial review of the Board's decision.

6. I am aware of the foregoing rights in paragraph five (5), and I voluntarily, knowingly, and intelligently waive these rights in return for the Board accepting my voluntary surrender of my massage therapist license in lieu of other disciplinary action.

- 1 7. I understand this Voluntary Surrender is considered disciplinary action and as such will  
2 become part of my permanent record.  
3 8. I understand this Voluntary Surrender is considered public information.  
4 9. I understand this Voluntary Surrender is considered disciplinary action and will be reported to  
5 the national repository, which records disciplinary action taken against licensees, or an  
6 agency or another state, which regulates the practice of Massage Therapy.  
7 10. I understand this Voluntary Surrender may be used in any subsequent hearings by the Board  
8 as evidence against me to establish a pattern of behavior and for the purpose of proving  
9 additional acts of misconduct.  
10 11. This Voluntary Surrender shall not be construed as excluding or reducing any criminal or civil  
11 penalties or sanctions in any other matter.  
12 12. I understand that this surrender is effective on the date it was accepted by the Board, which  
13 was October 30, 2019.  
14 13. I agree not to apply for re-licensure with the Board as a massage therapist until three years  
15 have passed from the date of the Board's acceptance of this Voluntary Surrender, which was  
16 at its meeting held on October 30, 2019.

17 I, Meixiang Yang, by my signature affixed below, agree with the foregoing facts and representations  
18 and thus choose to voluntarily surrender my License to practice as a massage therapist in Nevada.

19 NEVADA STATE BOARD OF MASSAGE THERAPY retains jurisdiction in this case until  
20 all conditions have been met to the satisfaction of the Board.

21 NEVADA STATE BOARD  
22 OF MASSAGE THERAPY

RESPONDENT

23 Gary Hukva  
24 Board Chair

25 Date

26 Meixiang Yang  
27 Meixiang Yang, Respondent

28 Date

LEGAL COUNSEL

Kirk T. Kennedy, Esq.  
815 S. Casino Center Blvd.  
Las Vegas, Nevada 89101  
for the Respondent

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

9. Formal Hearing Meixiang Yang – NVMT #7696 – NVMT-C-1907. (The Board may convene in closed session to consider the character, alleged misconduct, professional competence or physical or mental health of a person.) (For Possible Action)

Meixiang Yang was not present; Kirk Kennedy, Legal Counsel was present.

April Whiting motioned to accept voluntary surrender agreement, seconded by Teresa Lopez. Motion carried unanimously.

[illegible]



BEFORE THE NEVADA STATE BOARD OF  
MASSAGE THERAPY

In the Matter of:

Meixiang Yang,

Licensed Massage Therapist  
Nevada License No. NVMT.7696,

Respondent.

Case No. NVMT-C-1907

**COMPLAINT AND  
RE - NOTICE OF HEARING**

The Nevada State Board of Massage Therapy (Board), by and through its Executive Director, Sandra Anderson, hereby notifies Meixiang Yang ("Respondent") of an administrative hearing, which is to be held pursuant to Chapters 233B, 622, 622A of the Nevada Revised Statutes (NRS) and 640C of the Nevada Revised Statutes (NRS) and the Nevada Administrative Code (NAC). The purpose of the hearing is to consider the allegations stated below and to determine if the Respondent should be subject to an administrative penalty as set forth in NRS 640C.710, if the stated allegations are proven at the hearing by the evidence presented.

Respondent is currently and at all times mentioned herein, licensed as a massage therapist in the State of Nevada and is therefore, subject to the jurisdiction of the Board and the provisions of NRS Chapter 640C.

IT IS HEREBY ALLEGED AND CHARGED AS FOLLOWS:

**ALLEGED FACTS**

1. On or about January 2, 2019, Respondent, while working at Mei Li Massage located at 2470 E. Tropicana Ave. #F, Las Vegas, Nevada 89121, was arrested for soliciting sexual activity to an undercover police officer during the course of practicing massage.

**VIOLATIONS OF LAW**

**COUNT ONE**

2. By soliciting sexual activity during the course of practicing a massage, Respondent violated the provisions of NRS 640C.700(4), NRS 640C.700(2) and/or NRS 640C.700(9).

**PRAYER FOR RELIEF**

WHEREFORE, Executive Director, Sandra Anderson, prays as follows:

3. That the Board conduct a hearing on this complaint as provided by statute, and after such hearing, that the Board impose upon Respondents the discipline permitted by NRS 640C.710, which may include the following, (a) the imposition of an administrative fine of not more than \$5,000.00 per violation, (b) recovery of reasonable investigative fees and costs incurred, (c) recovery of attorney fees pursuant to NRS 622.400, (d) licensee be publicly reprimanded, (e) suspend, revoke or place conditions on the licensee's license, (f) place the licensee on probation, and/or (g) such other impositions as may be permitted by Nevada law.

PLEASE TAKE NOTICE that a disciplinary hearing has been set to consider this Administrative Complaint against the above-named Respondent in accordance with Chapters 233B, 622, 622A and 640C of the Nevada Revised Statutes.

THE HEARING WILL TAKE PLACE on **Wednesday, October 30, 2019, commencing at 9:00 a.m.** or as soon thereafter as the Board is able to hear the matter at the Legislative Counsel Bureau, located at 401 S. Carson Street, Room 2135, Carson City, Nevada 89701, with video conferencing to the Grant Sawyer Building, located at 555 E. Washington Ave., Room 4412, Las Vegas, Nevada 89101.

PURSUANT TO NRS 622A.320, Respondent may, but is not required to, file an answer to this Complaint with the Board.

PURSUANT TO NRS 622A.330, Respondent may seek limited discovery from the Board.

As the Respondents, you are specifically informed that you have the right to appear and be heard in your defense, either personally or through counsel of your choice. You have the right to respond and to present relevant evidence and argument on all issues involved. You have the right to call and examine witnesses, introduce exhibits, and cross-examine opposing witnesses on any matter relevant to the issues involved.

You have the right to request that the Board issue subpoenas to compel witnesses to testify and/or evidence to be offered on your behalf. In making this request, you may be required to demonstrate the relevancy of the witnesses' testimony and/or evidence.

 ORIGINAL

1 The purpose of the hearing is to determine if the Respondent has violated the provisions of  
2 Chapter 640C of NRS and if the allegations contained herein are substantially proven by the evidence  
3 presented to further determine what administrative penalty is to be assessed against the Respondent, if  
4 any, pursuant to NRS 640C.710.

5 Should the Respondent fail to appear at the hearing, a decision may still be reached by the  
6 Board. As the Respondent, you are further advised that you may be charged with the attorney's fees  
7 and/or costs associated with the hearing pursuant to NRS 622.400.

8 Pursuant to NRS 233B.121(5), informal disposition of this case may be made by stipulation,  
9 agreed settlement, consent order, or default. Any attempt to negotiate this case should be made by  
10 contacting Sandra Anderson, (775) 687-9951 or sjanderson@lmt.nv.gov.

11 Pursuant to NRS 241.033(2)(b), the Nevada State Board of Massage Therapy may, without  
12 further notice, take administrative action against your license and/or certificate to practice within the  
13 State of Nevada if the Board determines that such administrative action is warranted after considering  
14 your character, alleged misconduct, professional competence, or physical or mental health.

15 Dated this 20th day of September 2019.

16 **NEVADA STATE BOARD OF MASSAGE THERAPY**

17   
18 SANDRA ANDERSON, Executive Director  
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 ORIGINAL

**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that on September 25, 2019, I deposited for mailing at Reno, Nevada,  
via Certified U.S. Mail, with return receipt and postage prepaid, a true and correct copy of the foregoing

**COMPLAINT AND NOTICE OF HEARING**, properly addressed as follows:

Meixiang Yang  
5161 Pioneer Ave. Apt 204  
Las Vegas, NV 89146

Kirk T. Kennedy, Esq.  
815 S. Casino Center Blvd.  
Las Vegas, NV 89101

91 7199 9991 7039 9416 3583

NEVADA STATE BOARD OF MASSAGE THERAPY

  
Employee

 ORIGINAL