TRANSMITTAL OF FINANCIAL REPORTS AND CERTIFICATION OF COMPLIANCE WITH UNITED STATES TRUSTEE OPERATING REQUIREMENTS FOR THE PERIOD ENDED: 9/30/11

IN RE:			
		CASE NO.:	09-21329
	:	Chapter 11	Marganatary Clares
AmTrust Properties Inc. nka AmFin		Judge:	Morgenstern-Clarren
Properties Inc.	:		
Debtor	₹.		
	:		
As debtor in possession, I affirm:			
That I have reviewed the financial statements	attached h	nereto, consist	ing of:
x Operating Statement [1]		(Form 2)	
x Balance Sheet [1]		(Form 3)	
x Summary of Operations [1]		(Form 4)	
x Monthly Cash Statement	•	(Form 5)	
x Statement of Compensation		(Form 6)	
x Schedule of In-Force Insurance	e	(Form 7)	
and that they have been prepared in accordance with practices, and fairly and accurately reflect the debtor's			
2. That the incurrence including and and account			11
That the insurance, including workers' compet as described in Section 4 of the Reporting Requirement	nsation and	a unemployme	ent insurance,
(If not, attach a written explanation) YES X		NO	s is in effect; and,
(in not, attach a mitton explanation)			
3. That all postpetition taxes as described in Sec	ctions 1 an	d 14 of the Op	erating
Instructions and Reporting Requirements For Chapter	11 cases	are current.	
(If not, attach a written explanation) YESX_		NO	
	. 8 S (S)	270 1977	
 No professional fees (attorney, accountant, et 	.c.) have be	een paid witho	ut specific
court authorization. (If not, attach a written explanation) YES X		NO	
(II flot, attach a written explanation)		NO	
5. All United States Trustee Quarterly fees have	been paid	and are curre	nt.
YESX_		NO	
 Have you filed your prepetition tax returns. 			
(If not, attach a written explanation) YESX_	_	NO	
I hereby certify, under penalty of perjury, that the information is true and correct.	mation pro	vided above a	nd in the attached documents
[1] - The Debtor has made substantial efforts to prepare and (the "Report"). However, given the nature of the Debtor's acc	counting sys	tem, it is somew	hat difficult to verify the accuracy of the
information contained in the Report. Therefore, the Debtor ca provided in the Report.	an give no a	ssurance as to	the accuracy of the information
provided in the Report.			
	-		7
	K	Loule	17 10
Paris 10-12-17	_		
Dated: 10-17-1/	Res	oonsible Offic	er of the Debtor in Possession
	(DO	464-831-8830
	-	Title	Phone

0921323111020000000000005

OPERATING STATEMENT (P&L) Period Ending: 9/30/11

Case No: 09-21329

	Current Month	Total Since Filing
Total Revenue/Sales	\$ -	\$ -
Cost of Sales	-	-
GROSS PROFIT		
EXPENSES:		
Officer Compensation	-	Sec.
Salary Expenses other Employees	-	~
Employee Benefits & Pensions	(4 8)	12
Payroll Taxes	-	Y <u>=</u>
Other Taxes	=	9,453
Rent and Lease Expense	₩ ₩	38
Interest Expense		1
Insurance	•	(-
Automobile and Truck Expense	= 1	
Utilities (gas, electric, phone)	-	
Depreciation	•	J. a.
Travel and Entertainment		<u> </u>
Repairs and Maintenance	a e).
Bank Service Charges	-	23
Supplies, Office Expense, etc.	≅টা	(♥
Other Expense	1 - 9	293
Advances and Other Borrowings	· - 9	
Equity in Joint Venture	-	508,776
TOTAL EXPENSES:		518,582
NET OPERATING PROFIT/(LOSS)	-	(518,582)
Add: Non-Operating Income:		
Interest Income	- 2	
Other Income	-	-
Less: Non-Operating Expenses:		
Professional Fees	₩)	X -2
Interest Expense	= 0	Very 2000 Alley
US Trustee Fees	20	2,275
NET INCOME/(LOSS)	\$ -	\$ (520,857)

Dated: 10-17-11

Responsible Officer of the Debtor in Possession

FORM 2

BALANCE SHEET Period Ending: 9/30/11

		Case No:	09-21329
	Current Mont	th Prior Month	11/30/2009 <u>At Filing</u>
ASSETS:	4	200.000 XX	
Cash	\$ 47	72 \$ 472	\$ 100
Inventory	(H	=	=
Accounts Receivables	42		-
Insider Receivables Land and Buildings	(. 	5.	=.
Furniture, Fixtures & Equip	÷-	<u> </u>	_
Equity in Joint Venture	4 400 04	- 1 100 040	4 000 500
FIT Receivalbe	1,120,81		1,629,586
TH Receivable	95,08	95,083	104,536
TOTAL ASSETS:	1,216,36	1,216,365	1,734,222
LIABILITIES:			
Postpetition Liabilities	-	~	-
Accounts Payable	-	<u> </u>	Ε.
Rent and Lease Payable	i de la companya de l	a.	=:
Wages and Salaries	(=	-	
Payable to Affiliate	1,50	1,500	₽
Other:		-	
TOTAL Postpetition Liab.	1,50	1,500	
Secured Liabilities:			
Subject to Postpetition			
Collateral or Financing Order	1 2.	-:	-:
All Other Secured Liab.	-2	•	<u> —</u> 11
TOTAL Secured Liab.			
Prepetition Liabilities:			
Taxes & Other Priority Liab.			
Unsecured Liabilities	:=.	- +0	-
Payable to Affiliate	7,584,98	7,584,986	7,583,486
Other	-	=3	-
TOTAL Prepetition Liab.	7,584,98	7,584,986	7,583,486
Equity:			
Owners Capital:	10	0 100	100
Retained Earnings-Pre Pet.	(5,849,36		(5,849,364)
Retained Earnings-Post Pet.	(520,85		
TOTAL Equity:	(6,370,12	(6,370,121)	(5,849,264)
TOTAL LIABILITIES			
AND EQUITY:	1,216,36	5 1,216,365	1,734,222
	Aloes		
Dated: 10-17-11 (anal) 4.	12/04		

Responsible Officer of the Debtor in Possession

SUMMARY OF OPERATIONS Period Ended: 9/30/11

Case No: 09-	-21329
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Schedule of Postpetition Taxes Payable

	Beginni Baland	100	Accrued/ Withheld	/ments/ posits	Ending <u>Balance</u>
Income Taxes Withheld:					
Federal	\$	•	\$ <u> </u>	\$	\$ -
State			-	-	
Local			<u> </u>		1
FICA Withheld		=	-	-	-
Employers FICA		-	-		- 20
Unemployment Tax:					
Federal		3.00	=	-	
State		i -	•		
Sales, Use & Excise Taxes		*	-	18	-
Property Taxes		-	w 0	-	-
Workers' Compensation		:=:	-	-	-
Other		127	-	-	~
TOTALS:	\$	1 =	\$ -	\$ -	\$ -

AGING OF ACCOUNTS RECEIVABLE AND POSTPETITION ACCOUNTS PAYABLE

Age in Days	0-30	30-60	Over 60
Post Petition			
Accounts Payable	NONE	-	
Accounts Receivable	NONE	-	<u>=</u>

For all postpetition accounts payable over 30 days old, please attached a sheet listing each such account, to whom the account is owed, the date the account was opened, and the reason for non-payment of the account.

Describe events or factors occurring during this reporting period materially affecting operations and formulation of a Plan of Reorganization:

Dated: 10-17-11

Responsible Officer of the Debtor in Possession

MONTHLY CASH STATEMENT Period Ending: 9/30/11

Cas	sh Activity Analysis (Cash Basis Only):					Case No:	09-21329	<u>-</u> 0
			ating - Old	150	rating cct.	Tax <u>Acct.</u>	Cash Coll. <u>Acct.</u>	Petty Cash <u>Acct.</u>
A.	Beginning Balance	\$	-	\$	472			
В.	Receipts (Attach separate schedule)		-		=			
C.	Balance Available (A + B)		•		472			
D.	Less Disbursements (Attach separate schedule)		ż		*			
E.	ENDING BALANCE (C - D)	\$		\$	472			
Ор	(PLEASE ATTACH COPIES OF MOST RECENT RECONCILED BANK STATEMENTS FROM EACH ACCOUNT) Operating Account: 1. Depository Name & Location 2. Account Number National City Bank - Cleveland OH 140582612							
Operating Account: 1. Depository Name & Location 2. Account Number PNC Bank - Cleveland OH 42-2719-0708								
Other monies on hand (specify type and location) i.e., CD's, bonds, etc.):								
Da	Date: 10-11 C Illow Responsible Officer of the Debtor in Possession							

FORM 5

MONTHLY STATEMENT OF INSIDER COMPENSATION/PAYMENTS Period Ending: 9/30/11

Case No: 09-21329

The following information is to be provided for each shareholder, officer, director, manager, insider, or owner that is employed by the debtor in possession.

Attach additional pages if necessary.

Name:	None		c	apacity:		Shareholde Officer Director Insider
Detailed D	escription of Duties:	71 				
Current C	ompensation Paid:		Weekly	or	Monthly	
Current B	enefits Paid:		Weekly	or	Monthly	=
	Health Insurance		on in anni promisi.		8-36-88-30,248-48-90° ■	
	Life Insurance					-
	Retirement					
	Company Vehicle					_
	Entertainment					
	Travel					_
	Other Benefits					—————————————————————————————————————
	Total Benefits				8	=
Current O	ther Payments Paid:		Weekly	or	Monthly	
	Rent Paid					
	Loans					J i
	Other (Describe)		(
	Other (Describe)				1	 2
	Other (Describe)	-			-	-
	Total Other Payments					=
CURREN'	TOTAL OF ALL PAYMENTS:		Weekly	or	Monthly	
Dated:	10-17-11	Respons	sible Officer o	f the De	tor in Pos	= session

FORM 6

SCHEDULE OF IN-FORCE INSURANCE

Period Ending: 9/30/11

		Case No:	09-21329
INSURANCE TYPE	CARRIER		EXPIRATION DATE
Dated: (6-(7-)(Responsible Officer of the Deb	losca tor in Pos	ssession

CASH AND CASH EQUIVALENTS, Period Ending 09/30/2011 AmFin Properties Inc - Case No.: 09-21329 Reconciliation Summary

Beginning Balance Cleared Balance Register Balance as of 09/30/2011 Ending Balance

471.93 471.93 471.93 471.93 Sep 30, 11

5:29 PM 10/10/11

AmFin Properties Inc - Case No.: 09-21329 Schedule of Cash Receipts - PNC Account 42-2719-0708

Amount Name September 2011 Adj Num Total 102127 · Cash In Bank, NCB - API Total CASH AND CASH EQUIVALENTS CASH AND CASH EQUIVALENTS 102127 - Cash in Bank, NCB - API Date Type TOTAL

Schedule of Cash Disbursements - PNC Account 42-2719-0708 AmFin Properties Inc - Case No.: 09-21329

September 2011

Amount					
Name					
Adj					
MuM					
Date	IVALENTS ink, NCB - API	In Bank, NCB - API	EQUIVALENTS		
Type	CASH AND CASH EQUIVALENTS 102127 · Cash in Bank, NCB - API	Total 102127 · Cash In Bank, NCB - API	Total CASH AND CASH EQUIVALENTS	TOTAL	

Accrual Basis

Free Business Checking

PNC Bank

For the Period 09/01/2011 to 09/30/2011

Primary Account Number: 42-2719-0708 Page 1 of 1

Number of enclosures: 0

AMFIN PROPERTIES INC 3391 PEACHTREE RD NE STE 110 ATLANTA GA 30326-1014 For 24-hour banking sign on to PNC Bank Online Banking on pnc.com

FREE Online Bill Pay

For customer service call 1-800-669-1518 Monday - Friday: 7 AM - 10 PM ET Saturday & Sunday: 8 AM - 5 PM ET

Para servicio en espanol, 1-800-669-1518

Moving? Please contact your local branch

Write to: Customer Service PO Box 609 Pittsburgh, PA 15230-9738

Visit us at PNC.com/treasury

TDD terminal: 1-800-531-1648
For hearing impaired clients only

Amfin Properties Inc

Free Business Checking Summary

Account number: 42-2719-0708

Overdraft Protection has not been established for this account. Please contact us if you would like to set up this service.

Balance Summary

Beginning balance 471.93

Deposits and other additions

Checks and other deductions

Ending balance

PNCBANK

.00

.00

471.93

Deposits and Other Additions			Checks and Other Ded	uctions	
Description	Items	Amount	Description	Items	Amount
Total	0	.00	Total	0	.00

Detail of Services Used During Current Period

Note: The total charge for the following services will be posted to your account on 10/03/2011 and will appear on your next statement as a single line item entitled Service Charge Period Ending 09/30/2011.

Description	Volume	Amount	
Account Maintenance Charge		.00	Required Balance Met
Returning Check Images Monthly Charge	1	3.00	
Dual Statement Delivery	1	.00	Included in Account
Total For Services Used This Period		3.00	
Total Service Charge		3.00	