

**United States Bankruptcy Court
District of Arizona**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): AMEC MID-CITY ANIMAL HOSPITAL, LLC	Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) 86-0517632	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 1745 W. Glendale Avenue Phoenix, AZ	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code 85021	ZIP Code
County of Residence or of the Principal Place of Business: Maricopa	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code

Location of Principal Assets of Business Debtor (if different from street address above):

<p align="center">Type of Debtor (Form of Organization) (Check one box)</p> <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<p align="center">Nature of Business (Check one box)</p> <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other	<p align="center">Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)</p> <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
<p align="center">Tax-Exempt Entity (Check box, if applicable)</p> <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		<p align="center">Nature of Debts (Check one box)</p> <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.

<p align="center">Filing Fee (Check one box)</p> <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	<p align="center">Chapter 11 Debtors</p> Check one box: <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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Statistical/Administrative Information

Debtor estimates that funds will be available for distribution to unsecured creditors.
 Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000

Estimated Assets

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

Estimated Liabilities

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

THIS SPACE IS FOR COURT USE ONLY

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): AMEC MID-CITY ANIMAL HOSPITAL, LLC	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed: - None -		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: - None -		Case Number:	Date Filed:
District:		Relationship:	Judge:
Exhibit A		Exhibit B	
(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		(To be completed if debtor is an individual whose debts are primarily consumer debts.)	
<input checked="" type="checkbox"/> Exhibit A is attached and made a part of this petition.		I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).	
		<input checked="" type="checkbox"/> _____ Signature of Attorney for Debtor(s) (Date)	
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.			
If this is a joint petition:			
<input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue			
(Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property			
(Check all applicable boxes)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
_____ (Name of landlord that obtained judgment)			
_____ (Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition
(This page must be completed and filed in every case)

Name of Debtor(s):
AMEC MID-CITY ANIMAL HOSPITAL, LLC

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Debtor

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X _____

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Signature of Attorney*

X /s/ Douglas C. Rhoads
Signature of Attorney for Debtor(s)

Douglas C. Rhoads 015265
Printed Name of Attorney for Debtor(s)

Law Office of Douglas C. Rhoads
Firm Name

3844 North 32nd Street, Suite 1
Phoenix, AZ 85018

Address

Email: RhoadsAssoc@gmail.com

602-499-7709 Fax: 208-475-7709
Telephone Number

May 16, 2011
Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Jennifer C. Hull
Signature of Authorized Individual

Jennifer C. Hull
Printed Name of Authorized Individual

Manager
Title of Authorized Individual

May 16, 2011
Date

B 1A (Official Form 1, Exhibit A) (9/97)

[If debtor is required to file periodic reports (e.g. forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11 of the Bankruptcy Code, this Exhibit "A" shall be completed and attached to the petition.]

**United States Bankruptcy Court
District of Arizona**

In re AMEC MID-CITY ANIMAL HOSPITAL, LLC Debtor(s) Case No. _____ Chapter 11

EXHIBIT "A" TO VOLUNTARY PETITION

1. If any of the debtor's securities are registered under Section 12 of the Securities Exchange Act of 1934, the SEC file number is _____.

2. The following financial data is the latest available information and refers to the debtor's condition on _____.

a. Total assets		\$	<u>0.00</u>					
b. Total debts (including debts listed in 2.c., below)		\$	<u>0.00</u>					
c. Debt securities held by more than 500 holders:				Approximate number of holders:				
secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$	<u>0.00</u>	<u>0</u>
secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$	<u>0.00</u>	<u>0</u>
secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$	<u>0.00</u>	<u>0</u>
secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$	<u>0.00</u>	<u>0</u>
secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$	<u>0.00</u>	<u>0</u>
d. Number of shares of preferred stock			<u>0</u>					<u>0</u>
e. Number of shares common stock			<u>0</u>					<u>0</u>

Comments, if any:

3. Brief description of Debtor's business:

4. List the name of any person who directly or indirectly owns, controls, or holds, with power to vote, 5% or more of the voting securities of debtor:

**United States Bankruptcy Court
District of Arizona**

In re AMEC MID-CITY ANIMAL HOSPITAL, LLC

Debtor(s)

Case No. _____

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Animal Cremation Service PO Box 695 Glendale, AZ 85311	Animal Cremation Service PO Box 695 Glendale, AZ 85311	Cremation Services		6,687.00
ARIZONA DEPARTMENT OF REVENUE Collection Division	ARIZONA DEPARTMENT OF REVENUE Collection Division	Tax Liability		2,628.75
Atomic Energy Lab 9261 Kirby Drive Houston, TX 77054	Atomic Energy Lab 9261 Kirby Drive Houston, TX 77054			271.00
BANK OF AMERICA PO BOX 26078 Greensboro, NC 27420	BANK OF AMERICA PO BOX 26078 Greensboro, NC 27420	LINES OF CREDIT		20,608.00
Bayer PO Box 223075 Pittsburgh, PA 15251	Bayer PO Box 223075 Pittsburgh, PA 15251			753.00
Butler AHS LLC 36527 Treasury Center Chicago, IL 60694-6500	Butler AHS LLC 36527 Treasury Center Chicago, IL 60694-6500			18,464.00
DEX PO Box 79167 Phoenix, AZ 85062-9167	DEX PO Box 79167 Phoenix, AZ 85062-9167	Advertising services		15,103.00
Diamondback Drugs 7901 E. McDowell Scottsdale, AZ 85257-3747	Diamondback Drugs 7901 E. McDowell Scottsdale, AZ 85257-3747			169.00
Fidelity National Title Ins. Co. Attn: Default Services Dept 60 E. Rio Salado Parkway, Suite 1106 Tempe, AZ 85281	Fidelity National Title Ins. Co. Attn: Default Services Dept 60 E. Rio Salado Parkway, Suite 1106 Tempe, AZ 85281			600,000.00
Henry Schein 135 Duryea Road Melville, NY 11747	Henry Schein 135 Duryea Road Melville, NY 11747			350.00
Heska 3760 Rocky Mountain Ave Loveland, CO 80538	Heska 3760 Rocky Mountain Ave Loveland, CO 80538			400.00

B4 (Official Form 4) (12/07) - Cont.

In re **AMEC MID-CITY ANIMAL HOSPITAL, LLC**

Case No. _____

Debtor(s) _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Idexx Lab Inc. PO Box 101327 Atlanta, GA 30392-1327	Idexx Lab Inc. PO Box 101327 Atlanta, GA 30392-1327			10,104.00
Intervet PO BOX 75612 Charlotte, NC 28275	Intervet PO BOX 75612 Charlotte, NC 28275			507.00
IRS Ogden, UT 84201-0039	IRS Ogden, UT 84201-0039	Employee TAX Withheld		38,588.41
Miller T. Crownover 3436 N. Grandview Drive Phoenix, AZ 85032	Miller T. Crownover 3436 N. Grandview Drive Phoenix, AZ 85032	Promissory Note on the Clinic		10,000.00
Pfizer Drugs PO Box 26078 Pittsburgh, PA 15274-7029	Pfizer Drugs PO Box 26078 Pittsburgh, PA 15274-7029			1,502.00
Smart Practice PO Box 29425 Phoenix, AZ 85028-9425	Smart Practice PO Box 29425 Phoenix, AZ 85028-9425			314.00
Spectrum Labs PO Box 16850 Mesa, AZ 85211	Spectrum Labs PO Box 16850 Mesa, AZ 85211			320.00
Waste Management PO Box 78251 Phoenix, AZ 85062-8251	Waste Management PO Box 78251 Phoenix, AZ 85062-8251			430.00
Western Medical Supply 117 E. Huntington Drive Arcadia, CA 91006	Western Medical Supply 117 E. Huntington Drive Arcadia, CA 91006			260.00

**DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the Manager of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date May 16, 2011Signature /s/ Jennifer C. Hull
Jennifer C. Hull
Manager

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
District of Arizona**

In re AMEC MID-CITY ANIMAL HOSPITAL, LLC

Debtor(s)

Case No. _____

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>2,000.00</u>
Prior to the filing of this statement I have received	\$	<u>2,000.00</u>
Balance Due	\$	<u>0.00</u>

2. \$ 0.00 of the filing fee has been paid.
3. The source of the compensation paid to me was:
 Debtor Other (specify):
4. The source of compensation to be paid to me is:
 Debtor Other (specify):
5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. [Other provisions as needed]
Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: May 16, 2011/s/ Douglas C. Rhoads

Douglas C. Rhoads 015265
Law Office of Douglas C. Rhoads
3844 North 32nd Street, Suite 1
Phoenix, AZ 85018
602-499-7709 Fax: 208-475-7709
RhoadsAssoc@gmail.com

**United States Bankruptcy Court
District of Arizona**

In re AMEC MID-CITY ANIMAL HOSPITAL, LLC

Debtor(s)

Case No. _____

Chapter 11

DECLARATION

I, the Manager of the corporation named as the debtor in this case, do hereby certify, under penalty of perjury, that the Master Mailing List, consisting of 3 sheet(s), is complete, correct and consistent with the debtor(s)' schedules.

Date: May 16, 2011/s/ Jennifer C. Hull**Jennifer C. Hull/Manager**

Signer/Title

Date: May 16, 2011/s/ Douglas C. Rhoads

Signature of Attorney

Douglas C. Rhoads 015265**Law Office of Douglas C. Rhoads****3844 North 32nd Street, Suite 1****Phoenix, AZ 85018****602-499-7709 Fax: 208-475-7709**

MML-5

AMEC MID-CITY ANIMAL HOSPITAL, LLC -

ANIMAL CREMATION SERVICE
PO BOX 695
GLENDALE AZ 85311

ARIZONA DEPARTMENT OF REVENUE
COLLECTION DIVISION

ATOMIC ENERGY LAB
9261 KIRBY DRIVE
HOUSTON TX 77054

BANK OF AMERICA
PO BOX 26078
GREENSBORO NC 27420

BAYER
PO BOX 223075
PITTSBURGH PA 15251

BUFFALO FILTER
595 COMMERCE DRIVE
BUFFALO NY 14228

BUTLER AHS LLC
36527 TREASURY CENTER
CHICAGO IL 60694-6500

DEX
PO BOX 79167
PHOENIX AZ 85062-9167

DIAMONDBACK DRUGS
7901 E. MCDOWELL
SCOTTSDALE AZ 85257-3747

FIDELITY NATIONAL TITLE INS. CO.
ATTN: DEFAULT SERVICES DEPT
60 E. RIO SALADO PARKWAY, SUITE 1106
TEMPE AZ 85281

HENRY SCHEIN
135 DURYEA ROAD
MELVILLE NY 11747

AMEC MID-CITY ANIMAL HOSPITAL, LLC -

HESKA
3760 ROCKY MOUNTAIN AVE
LOVELAND CO 80538

IDEXX LAB INC.
PO BOX 101327
ATLANTA GA 30392-1327

INTERVET
PO BOX 75612
CHARLOTTE NC 28275

IRS
OGDEN UT 84201-0039

JARDON EYE PROSTHETICS
15920 W 12 MILE ROD
SOUTHFIELD MI 48076

MILLER T. CROWNOVER
3436 N. GRANDVIEW DRIVE
PHOENIX AZ 85032

PFIZER DRUGS
PO BOX 26078
PITTSBURGH PA 15274-7029

SMART PRACTICE
PO BOX 29425
PHOENIX AZ 85028-9425

SPECTRUM LABS
PO BOX 16850
MESA AZ 85211

WASTE MANAGEMENT
PO BOX 78251
PHOENIX AZ 85062-8251

WEDGEWOOD PHARMACY
405 HERON DRIVE, SUITE 200
SWEDESBORO NJ 08085-1749

AMEC MID-CITY ANIMAL HOSPITAL, LLC -

WESTERN MEDICAL SUPPLY
117 E. HUNTINGTON DRIVE
ARCADIA CA 91006

**United States Bankruptcy Court
District of Arizona**

In re AMEC MID-CITY ANIMAL HOSPITAL, LLC

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for AMEC MID-CITY ANIMAL HOSPITAL, LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

May 16, 2011

Date

/s/ Douglas C. Rhoads

Douglas C. Rhoads 015265

Signature of Attorney or Litigant

Counsel for AMEC MID-CITY ANIMAL HOSPITAL, LLC

Law Office of Douglas C. Rhoads

3844 North 32nd Street, Suite 1

Phoenix, AZ 85018

602-499-7709 Fax:208-475-7709

RhoadsAssoc@gmail.com