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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)	Chapter 11	
		Check if this a amended filing

# Official Form 201 Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

an

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1.	Debtor's name	Cal Premium Treats, Inc.	
2.	All other names debtor used in the last 8 years		
	Include any assumed names, trade names and <i>doing business as</i> names		
3.	Debtor's federal Employer Identification Number (EIN)	46-3406034	
4.	Debtor's address	Principal place of business	Mailing address, if different from principal place of business
		20343 Harvill Avenue Perris, CA 92570	
		Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code
		Riverside	Location of principal assets, if different from principal
		County	place of business
			Number, Street, City, State & ZIP Code
5.	Debtor's website (URL)		
6.	Type of debtor	Corporation (including Limited Liability Compar	y (LLC) and Limited Liability Partnership (LLP))
		Partnership (excluding LLP)	
		□ Other. Specify:	

	Case 6:16-bk	-17522-SC		1 Filed 08/ Document			/22/16 17:04:15	Desc
Debtor Cal Premium Treats, Inc.		Inc.	Iviali		гay	Je 2 of 11 Case number (i	f known)	
	Name							
7.	Describe debtor's business	ess A. Check one:						
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))						
		□ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))						
		Railroad (as defined in 11 U.S.C. § 101(44))						
		Stockbroker (as defined in 11 U.S.C. § 101(53A))						
		Commodity Broker (as defined in 11 U.S.C. § 101(6))						
		□ Clearing Bank (as defined in 11 U.S.C. § 781(3))						
		None of the a	bove					
		B. Check all that	apply					
		Tax-exempt er	ntity (as d	escribed in 26 U.S	S.C. §501)			
		Investment co	ompany, i	ncluding hedge fu	nd or poole	ed investment vehic	cle (as defined in 15 U.S.0	C. §80a-3)
		Investment ac	lvisor (as	defined in 15 U.S	.C. §80b-2	2(a)(11))		
							at best describes debtor.	
		See <u>http://www</u>	v.uscourt	s.gov/four-digit-na	tional-asso	ociation-naics-code	<u>s</u> .	
8.	Under which chapter of the Bankruptcy Code is the	Check one:						
	debtor filing?	Chapter 7						
		Chapter 9						
		Chapter 11. C	check all t	that apply:				
		Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affilia are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after the second						
							d in 11 U.S.C. § 101(51D).	
			b	usiness debtor, at	tach the m	lost recent balance	sheet, statement of operators do not	ations, cash-flow
				rocedure in 11 U.S			or these documents do no	or exist, ionow the
			D A	plan is being filed	d with this p	petition.		
				cceptances of the ccordance with 11	•		on from one or more class	es of creditors, in
			ПΤ	he debtor is requi	red to file p	periodic reports (for	r example, 10K and 10Q)	
			a	ttachment to Volu	ntary Petiti	ion for Non-Individu	d) of the Securities Exchan uals Filing for Bankruptcy	nge Act of 1934. File the under Chapter 11
			`	Official Form 201A	,		Securities Exchange Act of	f 1024 Dula 12h 2
		Chapter 12			ii company	y as defined in the	Securities Exchange Act of	JI 1954 Rule 12D-2.
9.	Were prior bankruptcy	No.						
	cases filed by or against the debtor within the last 8	■ No. □ Yes.						
	years?	L res.						
	If more than 2 cases, attach a separate list.	District			When		Case number	
	separate list.	District			When			
10.	Are any bankruptcy cases pending or being filed by a	No						
	business partner or an	TYes.						
	affiliate of the debtor? List all cases. If more than 1,							
	attach a separate list	Debtor					Relationship	
		District			When		Case number, if kno	wn
-								

Case 6:16-bk-17522-SC Debtor Cal Premium Treats, Inc.		Doc 1 Fileo Main Docum		Entered 08/22/16 ge 3 of 11 Case number (if known)	6 17:04:15	Desc		
200	Name	5, 110.						
11.	Why is the case filed in	Check all that apply	r.					
	this district?				ness, or principal assets in t Irt of such 180 days than in		days immediately	
		A bankruptcy	case concerning deb	otor's affiliate, ge	neral partner, or partnership	is pending in this	district.	
12.	Does the debtor own or	■ No						
	have possession of any real property or personal		elow for each property that needs immediate attention. Attach additional sheets if needed.					
	property that needs immediate attention?	Why doe	es the property need immediate attention? (Check all that apply.)					
		🗖 It pose	es or is alleged to pos	e a threat of imm	ninent and identifiable hazar	d to public health	or safety.	
		What is	s the hazard?					
		🗖 It need	to be physically se	cured or protecte	ed from the weather.			
					ould quickly deteriorate or l uce, or securities-related as			
		☐ Other						
		Where is	the property?					
		la tha pro	anarty incurad?	Number, Street, City, State & ZIP Code				
			operty insured?					
		□ No □ Yes.	Insurance agency					
			Contact name					
			Phone					
	Statistical and admin	istrative information	1					
13.	Debtor's estimation of	. Check one:						
	available funds	Funds wi	ill be available for dist	tribution to unsec	cured creditors.			
		After any	administrative exper	nses are paid, no	funds will be available to u	nsecured creditor	S.	
14.	Estimated number of creditors	■ 1-49		□ 1,000-5, □ 5001-10		□ 25,001-50,0 □ 50,001-100		
		□ 50-99 □ 100-199				☐ More than1		
		□ 200-999						
15.	Estimated Assets	■ \$0 - \$50,000		□ \$1 000 (	001 - \$10 million	□ \$500,000,0	01 - \$1 billion	
		■ \$0 - \$30,000 □ \$50,001 - \$100,0	000		,001 - \$50 million		,001 - \$10 billion	
		□ \$100,001 - \$500	,000		,001 - \$100 million		0,001 - \$50 billion	
		□ \$500,001 - \$1 m	illion	<b>L</b> \$100,00	0,001 - \$500 million	☐ More than \$	noiiiid ac	
16.	Estimated liabilities	□ \$0 - \$50,000		\$1 000 0	001 - \$10 million	□ \$500,000,0	01 - \$1 billion	
		□ \$50,001 - \$100,			,001 - \$50 million	□ \$1,000,000	,001 - \$10 billion	
		□ \$100,001 - \$500 □ \$500,001 - \$1 m			,001 - \$100 million	□ \$10,000,000 □ More than \$	0,001 - \$50 billion	
		<b>L</b>		LI \$100,00	0,001 - \$500 million			

	Main
Cal Premium Treats, Inc.	

Debtor

Name

Page 4 of 11 Case number (if known)

Request for Relief, D	Declaration, and Signatures					
	is a serious crime. Making a false statement in connection up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, an	with a bankruptcy case can result in fines up to \$500,000 or d 3571.				
17. Declaration and signature of authorized representative of debtor	The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. I have been authorized to file this petition on behalf of the debtor.					
	I have examined the information in this petition and have	e a reasonable belief that the information is trued and correct.				
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed on August 22, 2016 MM / DD / YYYY					
)	/ /s/ Salvatore Palermo	Salvatore Palermo				
	Signature of authorized representative of debtor	Printed name				
	Title President	_				
18. Signature of attorney	/s/ Thomas J. Polis	Date August 22, 2016				
	Signature of attorney for debtor	MM / DD / YYYY				
	Thomas J. Polis					
	Printed name					
	Polis & Associates, APLC					
	Firm name					
	Irvine, CA 92612-2433 Number, Street, City, State & ZIP Code					
	Contact phone (949) 862-0040 Email ad	dress tom@polis-law.com				
	_119326					
	Bar number and State					

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Fill in this information to identify the case:

Debtor name Cal Premium Treats, Inc. United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known):

Check if this is an

amended filing

## Official Form 204 Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	omplete mailing address, and email address of (for example, trade is contingen	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.			
and government contracts)		Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim		
A Plus Homes, Inc. dba A Plus Environmental 9351 Narnia Dr. Riverside, CA 92503			Contingent Unliquidated Disputed			\$101,350.00
Arizona Polymer 415 Huguenot Street New Rochelle, NY 10801			Contingent Unliquidated Disputed			\$22,114.00
Atwork Franchise Inc. P.O. Box 202992 Dallas, TX 75320			Contingent Unliquidated Disputed			\$43,202.00
Baghouse & Industrial Sheet Metal 1731 Pomona Road Corona, CA 92880			Contingent Unliquidated Disputed			\$68,080.00
California Choice P.O. Box 7088 Orange, CA 92863			Contingent Unliquidated Disputed			\$80,145.00
Cargill Food Distribution-L.A. P.O. Box 749481 Los Angeles, CA 90074			Contingent Unliquidated Disputed			\$75,843.00
Cortland CMS Business Loan Services 8440 Allison Pointe Blvd., #400 Indianapolis, IN 46250			Contingent Unliquidated Disputed			\$102,496.00

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#### Debtor Cal Premium Treats, Inc. Name

Case number (if known)

Name of creditor and complete mailing address, including zip code Name, telephone number and email address of creditor contact	and email address of	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
			Total claim, if partially secured	Deduction for value U of collateral or setoff	nsecured claim	
Food Safety Net Services 199 W. Rhapsody Drive San Antonio, TX			Contingent Unliquidated Disputed			\$22,819.00
78216 Future Electric P.O. Box 2525 Victorville, CA 92393			Contingent Unliquidated Disputed			\$30,322.00
Gerard Daniel Worldwide 1420 S. Vintage Ave. Ontario, CA 91761			Contingent Unliquidated Disputed			\$58,591.00
Heat Transfer 16812 Gothard St. Huntington Beach, CA 92647			Contingent Unliquidated Disputed			\$31,885.00
Merieux Nutrisciences Sililkier, Inc. 3155 Paysphere Circle Chicago, IL 60674			Contingent Unliquidated Disputed			\$25,395.00
Northland Choice 437 34th Ave. S Waite Park, MN 56387			Contingent Unliquidated Disputed			\$44,613.00
Parchem 415 Huguenot St. New Rochelle, NY 10801			Contingent Unliquidated Disputed			\$22,114.00
Paylocity 3850 N. Wilke Road Arlington Heights, IL 60004			Contingent Unliquidated Disputed			\$80,000.00
Reiser 725 Dedham St. Canton, MA 02021			Contingent Unliquidated Disputed			\$40,791.00
Snelling P.O. Box 650765 Dallas, TX 75265			Contingent Unliquidated Disputed			\$61,551.00
The Hartford 690 Asylum Avenue Hartford, CT 06155			Contingent Unliquidated Disputed			\$36,521.00
Treif USA 50 Waterview Drive, Ste. 130 Shelton, CT 06484			Contingent Unliquidated Disputed			\$41,142.00
Unifirst 700 South Etiwanda Ontario, CA 91761			Contingent Unliquidated Disputed			\$31,702.00

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Cal Premium Treats, Inc. 20343 Harvill Avenue Perris, CA 92570

Thomas J. Polis Polis & Associates, APLC 19800 MacArthur Boulevard, Suite 1000 Irvine, CA 92612-2433

Office of the US Trustee, Riverside 3685 Main St, 3rd Fl Riverside, CA 92501

A Plus Homes, Inc. dba A Plus Environmental 9351 Narnia Dr. Riverside, CA 92503

Arizona Polymer 415 Huguenot Street New Rochelle, NY 10801

Atwork Franchise Inc. P.O. Box 202992 Dallas, TX 75320

Baghouse & Industrial Sheet Metal 1731 Pomona Road Corona, CA 92880

California Choice P.O. Box 7088 Orange, CA 92863

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Cargill Food Distribution-L.A. P.O. Box 749481 Los Angeles, CA 90074

Cortland CMS Business Loan Services 8440 Allison Pointe Blvd., #400 Indianapolis, IN 46250

Food Safety Net Services 199 W. Rhapsody Drive San Antonio, TX 78216

Future Electric P.O. Box 2525 Victorville, CA 92393

Gerard Daniel Worldwide 1420 S. Vintage Ave. Ontario, CA 91761

Heat Transfer 16812 Gothard St. Huntington Beach, CA 92647

Merieux Nutrisciences Sililkier, Inc. 3155 Paysphere Circle Chicago, IL 60674

Northland Choice 437 34th Ave. S Waite Park, MN 56387

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Parchem 415 Huguenot St. New Rochelle, NY 10801

Paylocity 3850 N. Wilke Road Arlington Heights, IL 60004

Reiser 725 Dedham St. Canton, MA 02021

Snelling P.O. Box 650765 Dallas, TX 75265

The Hartford 690 Asylum Avenue Hartford, CT 06155

Treif USA 50 Waterview Drive, Ste. 130 Shelton, CT 06484

Unifirst 700 South Etiwanda Ontario, CA 91761

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Attorney or Party Name, Address, Telephone & FAX Nos., and State Bar No. & Email Address Thomas J. Polis 19800 MacArthur Boulevard, Suite 1000	FOR COURT USE ONLY
Irvine, CA 92612-2433	
(949) 862-0040 Fax: (949) 862-0041 California State Bar Number: 119326	
tom@polis-law.com	
tomepons-law.com	
Attorney for:	
UNITED STATES BAI CENTRAL DISTRIC	
In re:	CASE NO.:
Cal Premium Treats, Inc.	ADVERSARY NO.:
Debtor(s),	CHAPTER: 11
Plaintiff(s),	
	CORPORATE OWNERSHIP STATEMENT
	PURSUANT TO FRBP 1007(a)(1)
	and 7007.1, and LBR 1007-4
	[No hearing]
Defendant(s).	

Pursuant to FRBP 1007(a)(1) and 7007.1, and LBR 1007-4, any corporation, other than a governmental unit, that is a debtor in a voluntary case or a party to an adversary proceeding or a contested matter shall file this Statement identifying all its parent corporations and listing any publicly held company, other than a governmental unit, that directly or indirectly own 10% or more of any class of the corporation's equity interest, or state that there are no entities to report. This Corporate Ownership Statement must be filed with the initial pleading filed by a corporate entity in a case or adversary proceeding. A supplemental statement must promptly be filed upon any change in circumstances that renders this Corporate Ownership Statement inaccurate.

I, <u>Thomas J. Polis</u>, the undersigned in the above-captioned case, hereby declare (*Print Name of Attorney or Declarant*)

under penalty of perjury under the laws of the United States of America that the following is true and correct:

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#### [Check the appropriate boxes and, if applicable, provide the required information.]

- I have personal knowledge of the matters set forth in this Statement because:
  - I am the president or other officer or an authorized agent of the Debtor corporation
  - □ I am a party to an adversary proceeding
  - $\Box$  I am a party to a contested matter
  - I am the attorney for the Debtor corporation
- 2.a. The following entities, other than the debtor or a governmental unit, directly or indirectly own 10% or more of any class of the corporation's(s') equity interests:
  - [For additional names, attach an addendum to this form.]
  - b. There are no entities that directly or indirectly own 10% or more of any class of the corporation's equity interest.

August 22, 2016	
Date	

1

By: **/s/ Thomas J. Polis** Signature of Debtor, or attorney for Debtor

Name: Thomas J. Polis Printed name of Debtor, or attorney for Debtor