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	nited States Bank trict of Columbia		i age i	01.0		Voluntai	y Petition
Name of Debtor (if individual, enter Last, First, Middl Last, First Middle		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): MKM PNET LLC				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.I. (if more than one, state all): 200052391	D. (ITIN) No./Comp	plete EIN	Last four digits (if more than o	of Soc. Sec. or Indi ne, state all):	vidual-Taxpayer	I.D. (ITIN) No./C	omplete EIN
Street Address of Debtor (No. and Street, City, and St 1020 7th Street, NW	tate):		Street Address	of Joint Debtor (No.	and Street, City	, and State):	
Washington , DC	[20001	-				
County of Residence or of the Principal Place of Busin District of Columbia	ness:		County of Res	dence or of the Princ	cipal Place of Bu	isiness:	
Mailing Address of Debtor (if different from street add	dress):		Mailing Addre	ss of Joint Debtor (if	different from s	treet address):	
	Г		-				
Location of Principal Assets of Business Debtor (if dif	fferent from street ad	ddress above):					
Type of Debtor (Form of Organization) (Check one box.) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.	Health Care H	Real Estate as defin	ned in	tl Chapter 7 Chapter 9	he Petition is Fi Chap Reco	cy Code Under W led (Check one l oter 15 Petition for ognition of a Foreig	pox)
 Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) 	Railroad Stockbroker Commodity Broker Clearing Bank Other			Chapter 11 Main Proceeding Chapter 12 Chapter 13 Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding			ğn
		ervice Center		Dabta ara pr	(Cheo	re of Debts ck one box.) er 🛛 Debts a	ro primorily
	(Che Debtor is a ta under Title 20	ax-Exempt Entity eck box, if applicab ax-exempt organiza 6 of the United Stat ternal Revenue Coc	es personal, family, or house			S.C. business debts. an a	
Filing Fee (Check one box.) Full Filing Fee attached			Check one b	-	oter 11 Debtors		
 Filing Fee to be paid in installments (Applicable t Must attach signed application for the court's con unable to pay fee except in installments. Rule 100 	sideration certifying		Debtor in Check if:	s a small business de s not a small busines:	s debtor as defin	ed in 11 U.S.C. §	101(51D)
Filing Fee waiver requested (Applicable to chapter			insiders	aggregate noncontin or affiliates) are less	than \$2,190,000).	bts owned to
signed application for the court's consideration. See Official Form 3B. Check all applicable boxes: A plan is being filed with this petition. Acceptances of the plan were solicited prepetition of creditors, in accordance with 11 U.S.C. § 1					ition from one or r	nore classes	
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.					THIS SPACE IS FOR COURT USE ONLY		
49 99 199 99	00- 1,000		10,001 25,000		50,001- 100,000	Over 100,000	
\$50,000 \$100,000 \$500,000 to			to \$10	to \$500	01 \$500,000 to \$1 billi		
\$50,000 \$100,000 \$500,000 to			to \$10) to \$500	001 \$500,000 to \$1 billi		

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	IL Page 2 01 9	1 age 2				
Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): MKM PN	ET LLC				
All Prior Bankruptcy Case Filed Within La	ast 8 Years (If more than two, att	ach additional sheet.)				
Location None Where Filed:	Case Number:	Date Filed:				
Location Where Filed:	Case Number:	Date Filed:				
Pending Bankruptcy Case Filed by any Spouse, Partner o	or Affiliate of this Debtor (If more	e than one, attach additional sheet.)				
Name of Debtor:	Case Number:	Date Filed:				
None						
District:	Relationship:	Judge:				
Exhibit A (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.) □ Exhibit A is attached and made a part of this petition. □ Does the debtor own or have possession of any property that poses or is alleged to po □ Yes, and Exhibit C is attached and made a part of this petition.	Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) 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). X					
 No (To be completed by every individual debtor. If a joint petition is filed, each spouse n Exhibit D completed and signed by the debtor is attached and made a part of this If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached and made a part of the provided of the provi	s petition.	Exhibit D.)				
	garding the Debtor - Venue					
preceding the date of this petition or for a longer part of such 180 days than	 (Check any applicable box.) 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. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. 					
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 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 F	Resides as a Tenant of Residential	Property				
(Check a	all applicable boxes.)					
Landlord has a judgment against the debtor for possession of debtor's reside	ence. (If box checked, complete the	following.)				
	(Name of landlord that obtained judgment)					
	Address of landlord)					
 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 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. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).						

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Voluntary Petition (This page must be completed and filed in every case)		Name of Debtor(s): MKM PNET LLC	
(This page must be completed and med in every case)	Sig	natures	
	8		
Signature(s) of Debtor(s) (Individual/Joint)		Signature of a Forei	gn Representative
I declare under penalty of perjury that the information provided	in this petition	I declare under penalty of perjury that the inf	ormation provided in this petition
is true and correct.		is true and correct, that I am the foreign repre-	-
[If petitioner is an individual whose debts are primarily consume chosen to file under Chapter 7] I am aware that I may proceed u		proceeding, and that I am authorized to file th	his petition.
11, 12 or 13 of title 11, United States Code, understand the relie	-	(Check only one box.)	
each such chapter, and choose to proceed under chapter 7.		☐ I request relief in accordance with chapt	er 15 of title 11, United States
[If no attorney represents me and no bankruptcy petition prepare petition] I have obtained and read the notice required by § 342(b	-	Code. Certified copies of the documents	
Bankruptcy Code.) of the	attached.	
		Pursuant to § 1511 of title 11, United St	ates Code, I request relief in accordance
I request relief in accordance with the chapter of title 11, United specified in this petition.	States Code,	with the chapter of title 11 specified in t order granting recognition of the foreign	
x		Х	
Signature of Debtor		(Signature of Foreign Representative)	
X Signature of Joint Debtor			
Signature of Joint Debtor		(Printed Name of Foreign Representative	.)
Telephone Number (If not represented by attorney)			,
		Date	
Date			
Signature of Attorney*		Signature of Non-Attorney Ba	
X /s/Peter Clare		I declare under penalty of perjury that: (1) I a as defined in 11 U.S.C. 110; (2) I prepared th	
Signature of Attorney		and have provided the debtor with a copy of	-
Peter Clare Printed Name of Attorney for Debtor(s)		information required under 11 U.S.C. 110(b)	
Bonner Clare Law Firm PLLC		rules or guidelines have been promulgated pu a maximum fee for services chargeable by ba	
Firm Name		given the debtor notice of the maximum amou	
1629 K Street NW, Suite 300		for filing for a debtor or accepting any fee from section. Official Form 19B is attached.	om the debtor, as required in that
Address		section. Official Portir 19B is attached.	
Washington DC 20036		Printed Name and title, if any, of Bankru	ptcy Petition Preparer
202 288 8525		Social Security number (If the bankruptcy pe	tition preparer is not an individual,
Telephone Number		state the Social Security number of the office	r, principal, responsible person or
February 27, 2009		partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)
Date * In a case in which § 707(b)(4)(D) applies, this signature also con	stitutes a		
certification that the attorney has no knowledge after an inquiry that in the schedules is incorrect.		Address	
Signature of Debtor (Corporation/Partnership)			
I declare under penalty of perjury that the information provided	in this	X	
petition is true and correct, and that I have been authorized to fil			
petition on behalf of the debtor.			
The debtor requests relief in accordance with the chapter of title	11,	Date	
United States Code, specified in this petition.		Signature of Bankruptcy Petition Preparer or person, or partner whose social security num	
/s/Calvin Johnson Signature of Authorized Individual Calvin Johnson Printed Name of Authorized Individual		person, or parties whose social security hulli	bei is provided above.
		Names and Social Security numbers of all oth	
		prepared or assisted in preparing this docume preparer is not an individual.	ent unless the bankruptcy petition:
		FPart is not an individual	
		If more than one person prepared this docum	
Manging Member		conforming to the appropriate official form for	or each person.
Title of Authorized Individual		A bankruptcy petition preparer's failure to co	
February 27, 2009		of title 11 and the Federal Rules of Bankrupt in fines or imprisionment or both 11 U.S.C. §	
Date		m mes or imprisionment or bour 11 U.S.C. §	; 110, 10 U.S.C. § 150.

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UNITED STATES BANKRUPTCY COURT District of Columbia, D.C. Division

MKM PNET LLC

Debtor

In Re:

Case No.

(if known)

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under

penalty of perjury that the attached Master Mailing List of creditors, consisting of sheet(s) is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

February 27, 2009

Date

/s/Peter Clare

Signature of Attorney

Signature of Debtor

Signature of Joint Debtor

/s/Calvin Johnson

Signature of Authorized Individual

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UNITED STATES BANKRUPTCY COURT

District of Columbia, D.C. Division

In Re:	MKM PNET LLC	Case No.	
	Debtor	(if known)	

Debtor

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)
	Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code of employee, agent, or department of creditor familiar with claim who may be contacted.	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed or subject to setoff.	Amount of claim [if secured also state value of security]
1	Washington Convention Center 801 Mount Vernon Place, NW Washington DC 20001				71,000
2	Richo 2300 Parklake Drive NE Atlanta GA 30345				6900
3	Financial Pacific PO Box 4568 Federal Way 98063				8000
4	Bank of America PO Box 15710 Wilimington DE 19886				5000

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	(1)	(2)	(3)	(4)	(5)
	Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code of employee, agent, or department of creditor familiar with claim who may be contacted.	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed or subject to setoff.	Amount of claim [if secured also state value of security]
5	First Secuirty 1311 Londontown Blvd. Suite 120-111 Skyesville, MD 21784				400
6	Senoda Inc. 1050 17th Street, NW, Suite 600 Washington DC 20036				10,000

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	(1)	(2)		(4)	(5)
	Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code of employee, agent, or department of creditor familiar with claim who may be contacted.	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed or subject to setoff.	Amount of claim [if secured also state value of security]

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DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION

I, the undersigned authorized agent of the corporation named as the Debtor in this case, declare under penalty of perjury that I have read the foregoing "List of Creditors Holding 20 Largest Unsecured Claims" and that it is true and correct to the best of my knowledge, information and belief.

February 27, 2009 Date X /s/Calvin Johnson

Signature of Authorized Individual

Calvin Johnson, Manging Member Printed Name and Title Bank of America PO Box 15710 Wilimington DE 19886

Financial Pacific PO Box 4568 Federal Way 98063

First Secuirty 1311 Londontown Blvd. Suite 120-111 Skyesville, MD 21784

Richo 2300 Parklake Drive NE Atlanta GA 30345

Senoda Inc. 1050 17th Street, NW, Suite 600 Washington DC 20036

Washington Convention Center 801 Mount Vernon Place, NW Washington DC 20001