# B1 (Official Form 1) (1/08)

United St Souther	Volu	Voluntary Petition							
Name of Debtor (if individual, enter Last, First, Mid Altit, Haim	dle):	Name of Joint Debtor (Spouse) (Last, First, Middle):							
All Other Names used by the Debtor in the last 8 yea (include married, maiden, and trade names):	ars	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 EIN (if more than one, state all): <b>4046</b>	I.D. (ITIN) No./Complete	Last four digits of S EIN (if more than or	oc. Sec. or Individual-T ne, state all):	axpayer I.D.	(ITIN) No./Complete				
Street Address of Debtor (No. & Street, City, State & 19707 Turnberry Way Apt 28L	& Zip Code):	Street Address of Jo	int Debtor (No. & Stree	et, City, State	e & Zip Code):				
Aventura, FL	ZIPCODE 33180	1		Z	IPCODE				
County of Residence or of the Principal Place of Bus Miami-Dade	siness:	County of Residence	e or of the Principal Pla	ce of Busine	ss:				
Mailing Address of Debtor (if different from street a	uddress)	Mailing Address of	Joint Debtor (if differer	nt from street	t address):				
	ZIPCODE	-		Z	IPCODE				
Location of Principal Assets of Business Debtor (if a	lifferent from street address ab	ove):		I					
				Z	IPCODE				
<b>Type of Debtor</b> (Form of Organization)	Nature of B (Check one				Code Under Which Check one box.)				
<ul> <li>(Check one box.)</li> <li>✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.</li> <li>□ Corporation (includes LLC and LLP)</li> <li>□ Partnership</li> <li>□ Other (If debtor is not one of the above entities, check this box and state type of entity below.)</li> </ul>	<ul> <li>☐ Health Care Business</li> <li>☐ Single Asset Real Estat U.S.C. § 101(51B)</li> <li>☐ Railroad</li> <li>☐ Stockbroker</li> <li>☐ Commodity Broker</li> <li>☐ Clearing Bank</li> </ul>	ate as defined in 11  Chapter 7  Chapter 7  Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 12 Chapter 13 Recognition of a Foreign Nonmain Proceeding Nature of Debts							
	(Check box, if a Debtor is a tax-exempt Title 26 of the United S	Image: Tax-Exempt Entity       (f)         Image: Tax-Exempt Entity       Image: Tax-Exempt Entity         (Check box, if applicable.)       Image: Title 26 of the United States Code (the Internal Revenue Code).			Dox.) ☐ Debts are primarily business debts.				
Filing Fee (Check one box)       Chapter 11 Debtors         ✓ Full Filing Fee attached       □ Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).         □ 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.       Check if:         □ Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach 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 from one or more classes of									
Statistical/Administrative Information ✓ Debtor estimates that funds will be available for □ Debtor estimates that, after any exempt property distribution to unsecured creditors.		tors.	rdance with 11 U.S.C. §		THIS SPACE IS FOR COURT USE ONLY				
Estimated Number of Creditors           Image: Creditor of Creditors		001- 25,001- 000 50,000	50,001- 100,000	Over 100,000					
	000,001 to \$10,000,001 \$50 million to \$50 million \$10	0,000,001 to \$100,00 00 million to \$500		D More than \$1 billion					
Estimated Liabilities \$\begin{aligned} & & & & & & & & & & & & & & & & & & &		D,000,001 to \$100,00 00 million to \$500	0,001 \$500,000,001 million to \$1 billion	More than \$1 billion					

Case 08-17199-LMI Document 1 Filed 05/30/2008 Page 2 of 15

B1 (Official Form 1) (1/08)		Page 2					
<b>Voluntary Petition</b> (This page must be completed and filed in every case)	Name of Debtor(s): Altit, Haim						
Prior Bankruptcy Case Filed Within Last 8	<b>Years</b> (If more than two, attach	additional sheet)					
Location Where Filed: <b>None</b>	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 mo	re than one, attach additional sheet)					
Name of Debtor: <b>None</b>	Case Number:	Date Filed:					
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.)	o whose debts are primarily consumer debts.)						
	X /s/ Stan L. Riskin	5/30/08					
	Signature of Attorney for Debtor(s)	Date					
or safety? ☐ Yes, and Exhibit C is attached and made a part of this petition. ✓ No Exhi (To be completed by every individual debtor. If a joint petition is filed, ex ✓ Exhibit D completed and signed by the debtor is attached and ma If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached	ach spouse must complete and atta de a part of this petition.	ch a separate Exhibit D.)					
Information Regardin	ng the Debtor - Venue						
(Check any ap Debtor has been domiciled or has had a residence, principal place preceding the date of this petition or for a longer part of such 180		is District for 180 days immediately					
There is a bankruptcy case concerning debtor's affiliate, general	partner, or partnership pending in t	this District.					
Debtor is a debtor in a foreign proceeding and has its principal pl or has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in reg	out is a defendant in an action or pro	oceeding [in a federal or state court]					
Certification by a Debtor Who Reside		Property					
(Check all app Landlord has a judgment against the debtor for possession of deb	licable boxes.) tor's residence. (If box checked, co	omplete the following.)					
(Name of landlord or less	or that obtained judgment)						
(Address of lan	dlord or lessor)						
Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for post							
Debtor has included in this petition the deposit with the court of filing of the petition.	any rent that would become due du	uring the 30-day period after the					
Debtor certifies that he/she has served the Landlord with this cert	ification. (11 U.S.C. § 362(1)).						

Case 08-17199-LMI Document 1 Filed 05/30/2008 Page 3 of 15

Page 3

<u>B1 (</u>	Official Form 1) (1/08)	Page 3
	luntary Petition	Name of Debtor(s):
(Th	is page must be completed and filed in every case)	Altit, Haim
	Signa	atures
	Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
pet [If and und the cha [If the 342 I re Co	eclare under penalty of perjury that the information provided in this ition is true and correct. petitioner is an individual whose debts are primarily consumer debts d has chosen to file under Chapter 7] I am aware that I may proceed der chapter 7, 11, 12 or 13 of title 11, United State Code, understand relief available under each such chapter, and choose to proceed under upter 7. no attorney represents me and no bankruptcy petition preparer signs petition] I have obtained and read the notice required by 11 U.S.C. § 2(b). equest relief in accordance with the chapter of title 11, United States de, specified in this petition.	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 <b>one</b> 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
	Signature of Debtor Haim Altit	Signature of Polegn Representative
X		Printed Name of Foreign Representative
	Signature of Joint Debtor	
	Telephone Number (If not represented by attorney)	Date
	May 30, 2008	
	Date	
	Signature of Attorney*	Signature of Non-Attorney Petition Preparer
×	/s/ Stan L. Riskin Signature of Attorney for Debtor(s) Stan L. Riskin Florida Bar Printed Name of Attorney for Debtor(s) Stan L. Riskin P.A. Firm Name 8000 PETERS RD. STE A-200 Address PLANTATION, FL 33324	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); 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.
	May 30, 2008           Date	Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
cer	a case in which § 707(b)(4)(D) applies, this signature also constitutes a ification that the attorney has no knowledge after an inquiry that the srmation in the schedules is incorrect.	Address
	Signature of Debtor (Corporation/Partnership)	X
pet	eclare under penalty of perjury that the information provided in this ition is true and correct, and that I have been authorized to file this ition on behalf of the debtor.	Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.
	e debtor requests relief in accordance with the chapter of title 11, ited States Code, specified in this petition.	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy partition propagate is not an individual.
X		petition preparer is not an individual:
	Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized 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.
	Date	

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Southern District of Florida

Debtor(s)

IN RE:

Altit, Haim

Case No. \_\_\_\_\_ Chapter 11

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

 $\checkmark$  1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.* 

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

- ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:	/s/ Haim Altit
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Date: May 30, 2008

Case 08-17199-LMI	Document 1	Filed 05/30/2008	Page 5 of 15
B4 (Official Form 4) (12/07)			0

Debtor(s)

# United States Bankruptcy Court Southern District of Florida

IN RE:

Case No. \_\_\_\_\_

Altit, Haim

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 and Fed. R. Bankr. P. 1007(m).

(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.)	<ul> <li>(4)</li> <li>Indicate if claim</li> <li>is contingent,</li> <li>unliquidated,</li> <li>disputed or</li> <li>subject to setoff</li> </ul>	(5) Amount of claim (if secured also state value of security)
Larry Sazant 1920 E Hallandale Beach Blvd Ste 510 Hallandale Beach, FL 33009			Disputed	310,000.00
Wachovia Mortgage PO Box 105693 Atlanta, GA 30348				260,000.00 Collateral: 500,000.00 Unsecured: 240,000.00
Ahron Farache 1999 NE 150th St Ste 104 North Miami, FL 33181			Disputed	140,000.00
Yossef Berachi 1630 NE 20 Av Miami, FL 33162			Disputed	119,500.00
Issac Benyamani 17555 Collins Ave Apt 1402 Sunny Isles Beach, FL 33160			Disputed	40,000.00
Uri Bar 3201 NE 183rd St Aventura, FL 33160				40,000.00
Bank Of America PO Box 1598 Norfolk, VA 23501-1598	(800) 444-8430			6,380.00
Waterview PO Box 229030 Hollywood, FL 33022	33022			2,285.00 Collateral: 500,000.00 Unsecured: 2,285.00
Macys 9111 Duke Blvd Mason, OH 45040-8999				2,060.00
Washington Mutual PO Box 99604 Arlington, TX 76096-9604				1,990.00
Capital One Bank PO Box 650007 Dallas, TX 75265-0007				1,900.00

# DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I 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 30, 2008	Signature /s/ Haim Altit of Debtor	Haim Altit
Date:	Signature	

Case 08-17199-LMI B6A (Official Form 6A) (12/07)

Document 1 Filed 05/30/2008 Page 7 of 15

IN RE Altit, Haim

Debtor(s)

Case No. \_\_\_\_

(If known)

## **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

#### Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

	DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Ì	19707 turnberry way, 28I,	Tenancy by the	J	500,000.00	742,285.00
		Entirety	-	,	,
1		L			
		ТОТ	AL	500,000.00	
				(D	60111

(Report also on Summary of Schedules)

Case 08-17199-LMI	Document 1
B6D (Official Form 6D) (12/07)	

Filed 05/30/2008 Page 8 of 15

IN RE Altit, Haim

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Debtor(s)

Case No.

(If known)

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, 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 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.	Γ						480,000.00	
Countywide Mortgage PO Box 660694 Dallas, TX 75266			VALUE \$ 500,000.00					
ACCOUNT NO.				┢	┢	$\vdash$	260,000.00	240,000.00
Wachovia Mortgage PO Box 105693 Atlanta, GA 30348			VALUE \$ 500,000.00					
ACCOUNT NO.					t		2,285.00	2,285.00
Waterview PO Box 229030 Hollywood, FL 33022			VALUE \$ 500,000.00					
ACCOUNT NO.								
			VALUE \$					
continuation sheets attached			(Total of th	is p	otot pag	e)	\$  742,285.00	§ 242,285.00

(Use only on last page)

(Report also on (If applicable, report Summary of also on Statistical Schedules.) Summary of Certain Liabilities and Related Data.)

\$ 242,285.00

742,285.00

Case 08-17199-LMI Document 1 B6E (Official Form 6E) (12/07) Filed 05/30/2008 Page 9 of 15

IN RE Altit, Haim

Debtor(s)

Case No.

## (If known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Or may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

#### **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. 507(a)(1).

#### Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. 507(a)(3).

#### Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to 10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. 507(a)(5).

#### Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

#### **Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

#### ] Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

#### Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

#### Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**0** continuation sheets attached

Case 08-17199-LMI Document 1 B6F (Official Form 6F) (12/07) Filed 05/30/2008 Page 10 of 15

IN RE	Altit,	Haim
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Debtor(s)

Case No. \_

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						Х	
Ahron Farache 1999 NE 150th St Ste 104 North Miami, FL 33181							140,000.00
ACCOUNT NO.							140,000.00
Bank Of America PO Box 1598 Norfolk, VA 23501-1598							c 200 00
ACCOUNT NO.	-						6,380.00
Capital One Bank PO Box 650007 Dallas, TX 75265-0007							1,900.00
ACCOUNT NO.						X	1,300.00
Issac Benyamani 17555 Collins Ave Apt 1402 Sunny Isles Beach, FL 33160							40,000.00
1 continuation sheets attached	4	1	S (Total of th	Sub is p			\$ 188,280.00
			(Use only on last page of the completed Schedule F. Report	als		n	

the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

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(If known)

99-LMI	Document 1	Filed 05/30/2008	Page 11 of 15
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Case 08-171 B6F (Official Form 6F) (12/07) - Cont.
IN RE Altit, Haim

Debtor(s)

Case No.

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						x	
Larry Sazant 1920 E Hallandale Beach Blvd Ste 510 Hallandale Beach, FL 33009							310,000.00
ACCOUNT NO.							
Macys 9111 Duke Blvd Mason, OH 45040-8999							2,060.00
ACCOUNT NO.							2,000.00
Uri Bar 3201 NE 183rd St Aventura, FL 33160							40.000.00
ACCOUNT NO.							40,000.00
Washington Mutual PO Box 99604 Arlington, TX 76096-9604							
ACCOUNT NO.						x	1,990.00
Yossef Berachi 1630 NE 20 Av Miami, FL 33162							119,500.00
ACCOUNT NO.							119,300.00
ACCOUNT NO.							
Sheet no. 1 of 1 continuation sheets attached to				L Sub	toto		
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th	is p	age	)	§ 473,550.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Related	als atis	tica	n il	\$   661,830.00

Case 08-17199-LMI Document 1 B6 Declaration (Official Form 6 - Declaration) (12/07) Filed 05/30/2008 Page 12 of 15

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IN	RE	Altit.	Haim

## Debtor(s)

Case No.

(If known)

# DECLARATION CONCERNING DEBTOR'S SCHEDULES

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_15 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: May 30, 2008	Signature: /s/ Haim Altit			
	Haim Altit	Debtor		
Date:	Signature:			

(Joint Debtor, if any) [If joint case, both spouses must sign.]

#### DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

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 by that section.

 Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer
 Social Security No. (Required by 11 U.S.C. § 110.)

 If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Signature of Bankruptcy Petition Preparer

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 signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision 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.

## DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the \_\_\_\_\_

(the president or other officer or an authorized agent of the corporation or a

Date

member or an authorized agent of the partnership) of the \_\_\_\_\_

(corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_\_ sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_

\_\_\_\_\_ Signature:

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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.

Address

# United States Bankruptcy Court Southern District of Florida

IN RE:

Case No. \_\_\_\_\_

Chapter 11\_\_\_\_\_

# Altit, Haim

# VERIFICATION OF CREDITOR MATRIX

Debtor(s)

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: May 30, 2008	Signature: /s/ Haim Altit Haim Altit	Debtor
Date:	Signature:	Joint Debtor, if any

Ahron Farache 1999 NE 150th St Ste 104 North Miami, FL 33181

Bank Of America PO Box 1598 Norfolk, VA 23501-1598

Capital One Bank PO Box 650007 Dallas, TX 75265-0007

Countywide Mortgage PO Box 660694 Dallas, TX 75266

Issac Benyamani 17555 Collins Ave Apt 1402 Sunny Isles Beach, FL 33160

Larry Sazant 1920 E Hallandale Beach Blvd Ste 510 Hallandale Beach, FL 33009

Macys 9111 Duke Blvd Mason, OH 45040-8999

Uri Bar 3201 NE 183rd St Aventura, FL 33160

Wachovia Mortgage PO Box 105693 Atlanta, GA 30348 Washington Mutual PO Box 99604 Arlington, TX 76096-9604

Waterview PO Box 229030 Hollywood, FL 33022

Yossef Berachi 1630 NE 20 Av Miami, FL 33162