

B 1 (Official Form 1) (1/08)

**United States Bankruptcy Court  
 Southern District of Florida**

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>DTG Management, Inc.</b>	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): <b>421582025</b>	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. & Street, City, and State): <b>9485 S.W. 72nd Street, #A-150 Miami, FL</b>	Street Address of Joint Debtor (No. & Street, City, and State):
ZIP CODE <b>33173</b>	ZIP CODE
County of Residence or of the Principal Place of Business: <b>Miami-Dade</b>	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):  
**9485 S.W. 72nd Street, #A-150, Miami, FL** ZIP CODE **33173**

<b>Type of Debtor (Form of Organization)</b> (Check one box.) <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.)	<b>Nature of Business</b> (Check one box.) <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  <b>Tax-Exempt Entity</b> (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code.)	<b>Chapter of Bankruptcy Code Under which the Petition is Filed (Check one box)</b> <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  <b>Nature of Debts</b> (Check one box) <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.
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<b>Filing Fee (Check one box)</b> <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.	<b>Chapter 11 Debtors</b> Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.  Check all applicable boxes <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited proportionately from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.	<b>THIS SPACE IS FOR COURT USE ONLY</b>
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000	
<b>Estimated Assets</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	

B 1 (Official Form 1) (1/08)

FORM B1, Page 2

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>DTG Management, Inc.</b>	
All Prior Bankruptcy Cases Filed Within Last 8 Years (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 more than one, attach additional sheet)			
Name of Debtor: <b>Cardiac Management Inc.</b>	Case Number: 08-19029	Date Filed: 6/30/08	
District: <b>S.D. Fla.</b>	Relationship: <b>Parent</b>	Judge: Isicoff	
<b>Exhibit A</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.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</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 have delivered to the debtor the notice required by 11 U.S.C. § 342(b).  <input checked="" type="checkbox"/> <b>Not Applicable</b> Signature of Attorney for Debtor(s) _____ Date _____	
<b>Exhibit C</b>			
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			
<b>Exhibit D</b>			
(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.			
<b>Information Regarding the Debtor - Venue</b> (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.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (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)).			

B 1 (Official Form 1) (1/08)

FORM B1, Page 3

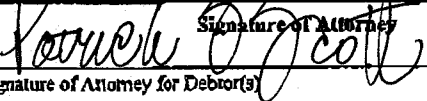
**Voluntary Petition**  
*(This page must be completed and filed in every case)*

**Names of Debtor(s):**  
**DTG Management, Inc.**

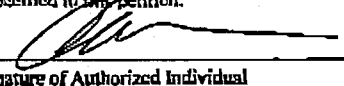
**Signatures**

**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 Not Applicable**  
Signature of Debtor  
**X Not Applicable**  
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 § 1515 of title 11 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 Not Applicable**  
(Signature of Foreign Representative)  
(Printed Name of Foreign Representative)  
Date

**X**   
Signature of Attorney  
Signature of Attorney for Debtor(s)  
**Patrick S. Scott Bar No. 290025**  
Printed Name of Attorney for Debtor(s) / Bar No.  
**Law Office of Patrick Scott**  
Firm Name  
**111 S.E. 12th Street, Suite B Ft. Lauderdale, FL 33316-1813**  
Address  
**954-523-1615 954-523-1614**  
Telephone Number  
**6-30-08**  
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 Non-Attorney 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.  
**Not Applicable**  
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

**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 the relief in accordance with the chapter of title 11, United States Code, specified in this petition.  
**X**   
Signature of Authorized Individual  
**Charles H. Wardlow**  
Printed Name of Authorized Individual  
**President**  
Title of Authorized Individual  
**6/30/08**  
Date

**X Not Applicable**  
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 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.*

B4 (Official Form 4) (12/07)

United States Bankruptcy Court  
Southern District of Florida

In re DTG Management, Inc.

Debtor

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

Chapter 11

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(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>
Merrill Lynch Business Financial Service C/O Michael M. Eidelman Vedder Price PC 222 N LaSalle St #2600 Chicago, IL 60601			UNLIQUIDATED	\$6,217,158.00
				<b>SECURED VALUE:</b> \$1,257,842.00
Frank Weinberg & Black PL 7803 SW 6 Ct Plantation, FL 33324				\$284,744.19
GECC POB 414, W-490 Milwaukee, WI 53201				\$274,735.74
				<b>SECURED VALUE:</b> \$183,157.16
Sovereign Bank POB 14833 Reading, PA 19612				\$50,857.79
				<b>SECURED VALUE:</b> \$33,905.19
GE Healthcare Financial Services POB 641419 Pittsburgh, PA 15264				\$29,405.72
First Insurance Funding Corp 8075 Innovation Way Chicago, IL 60682				\$27,218.44

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

In re DTG Management, Inc.

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

Debtor

Chapter 11

### LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <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>	(3) <i>Nature of claim (trade debt, bank loan, gov- ernment contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	(5) <i>Amount of claim [if secured also state value of security]</i>
Royal Office Products POB 2403 Bedford Park, IL 60499				\$26,271.15
Ikon Financial Services POB 740540 Atlanta, GA 30374				\$18,419.36
Max Power Inc 135 Oceanview Rd East Rockaway, NY 11518				\$16,915.00
Healthcare Compliance Partners 452 NW 112 Avenue Coral Springs, FL 33071				\$16,666.66
Sovereign Bank POB 14833 Reading, PA 19612				\$13,085.31
Valerio & Raimondi PC 1300 Jericho Turnpike New Hyde Park, NY 11048				\$12,849.42

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

In re DTG Management, Inc.

Debtor

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

Chapter 11

### LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(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)
General Electric Capital Corp c/o Gregory S Grossman Astigarraga Davis et al 701 Brickell Ave Floor 18 Miami, FL 33131				\$12,180.00
Blue Cross Blue Shield of Florida POB 105358 Atlanta, GA 30348				\$11,977.00
Anthony C Vitale PA Trust Account Law Center at Brickell Bay 2333 Brickell Avenue Miami, FL 33129				\$11,516.91
Ikon Office Solutions Ikon Office Solutions Florida District POB 532530 Atlanta, GA 30353				\$10,407.09
Sage Software Healthcare Inc 12644 Collection Center Drive Chicago, IL 60693				\$8,385.00
Bdo Seidman LLP 330 Madison Avenue New York, NY 10017				\$5,669.00

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

In re DTG Management, Inc.

Debtor

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

Chapter 11

### LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <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>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	(5) <i>Amount of claim (if secured also state value of security)</i>
Shred-It Miami 1885 W SR 84 #106 Fort Lauderdale, FL 33315				\$2,420.20
Bellsouth Advertising Basic Pro Collections Department POB 105024 Atlanta, GA 30348				\$1,801.70

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

I, Charles H. Wardlow, President 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: 6/30/08

Signature: 

**Charles H. Wardlow, President**

(Print Name and Title)

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  
Southern District of Florida**

In re **DTG Management, Inc.**

Case No.

Debtor.

Chapter **11**

**STATEMENT OF CORPORATE OWNERSHIP**

Comes now **DTG Management, Inc.** (the "Debtor") and pursuant to Fed. R. Bankr. P. 1007(a) and 7007.1 state as follows:

1. All corporations that directly or indirectly own 10% or more of any class of the Debtor's equity interests are listed below:

<b>Owner</b>	<b>% of Shares Owned</b>
<b>Cardiac Management Systems, Inc. 9485 S.W. 72 St., #A-150 Miami, FL 33173</b>	<b>100</b>

By:   
**Patrick S. Scott**  
Signature of Attorney

Counsel for **DTG Management, Inc.**

Bar no.: **290025**

Address.: **Law Office of Patrick Scott  
111 S.E. 12th Street, Suite B  
Ft. Lauderdale, FL 33316-1813**

Telephone No.: **954-523-1615**

Fax No.: **954-523-1614**

E-mail address:



B 203  
(12/94)

UNITED STATES BANKRUPTCY COURT  
Southern District of Florida

In re: DTG Management, Inc.  
Debtor

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

**DISCLOSURE OF COMPENSATION OF ATTORNEY  
FOR DEBTOR**

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(s) 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>6,000.00</u>
Prior to the filing of this statement I have received	\$	<u>6,000.00</u>
Balance Due	\$	<u>0.00</u>

2. The source of compensation paid to me was:

- Debtor
- Other (specify)

3. The source of compensation to be paid to me is:

- Debtor
- Other (specify)

4.  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.

5. 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) Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
  - e) [Other provisions as needed]
- The \$90,000 retainer has been allocated equally among 15 debtors but is subject to reallocation in a plan of reorganization.**

6. By agreement with the debtor(s) the above disclosed fee does not include the following services:

**None.**

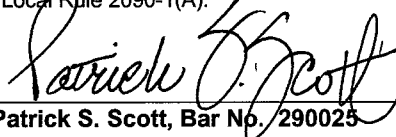
**CERTIFICATION**

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.

I hereby certify that I am admitted to the Bar of the United States District Court for the Southern District of Florida and I am in compliance with the additional qualifications to practice in this court set forth in Local Rule 2090-1(A).

Dated:

6/30/08



Patrick S. Scott, Bar No. 290025

111 S.E. 12th Street, Suite B  
Ft. Lauderdale, FL 33316-1813

Phone: 954-523-1615

Attorney For: DTG Management, Inc.