

B1 (Official Form 1)(1/08)

United States Bankruptcy Court Southern District of Florida		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Navix Imaging Inc.		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) 74-3043306		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 8100 Royal Palm Blvd. Suite 102 Coral Spring, FL		Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code 33065		ZIP Code
County of Residence or of the Principal Place of Business: Broward		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):		
Type of Debtor (Form of Organization) (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.)	Nature of Business (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 <hr/> Tax-Exempt Entity (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).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <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 Nature of Debts (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.
Filing Fee (Check one box) <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.		Chapter 11 Debtors 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 prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <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.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <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		
Estimated Assets <input checked="" 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 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		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input 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		

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Navix Imaging Inc.	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed: - None -		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: Soca Imaging Inc.		Case Number: 10-11265	Date Filed: 1/21/10
District:		Relationship: Affiliate	Judge: John K. Olson
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.) <input type="checkbox"/> Exhibit A 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). <input checked="" type="checkbox"/> _____ Signature of Attorney for Debtor(s) (Date)	
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) _____ (Name of landlord that obtained judgment) _____ (Address of landlord) <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

<p>Voluntary Petition</p> <p><i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): Navix Imaging Inc.</p>
Signatures	
<p style="text-align: center;">Signature(s) of Debtor(s) (Individual/Joint)</p> <p>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).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Debtor</p> <p>X _____ Signature of Joint Debtor</p> <p>_____ Telephone Number (If not represented by attorney)</p> <p>_____ Date</p>	<p style="text-align: center;">Signature of a Foreign Representative</p> <p>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.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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.</p> <p>X _____ Signature of Foreign Representative</p> <p>_____ Printed Name of Foreign Representative</p> <p>_____ Date</p>
<p style="text-align: center;">Signature of Attorney*</p> <p>X <u>/s/ Lynn H. Gelman, Esq.</u> Signature of Attorney for Debtor(s)</p> <p><u>Lynn H. Gelman, Esq. 0245011</u> Printed Name of Attorney for Debtor(s)</p> <p><u>Lynn H. Gelman, P.A.</u> Firm Name</p> <p>1450 Madruga Avenue Suite 408 Coral Gables, FL 33146</p> <p>_____ Address</p> <p><u>(305) 668-6681 Fax: (305) 668-6682</u> Telephone Number</p> <p><u>January 21, 2010</u> Date</p> <p><small>*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.</small></p>	<p style="text-align: center;">Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>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.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ 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.)</p> <p>_____ Address</p> <p>X _____ Date</p> <p>Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.</p> <p>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:</p> <p>_____ If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>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.</i></p>
<p style="text-align: center;">Signature of Debtor (Corporation/Partnership)</p> <p>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.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u>/s/ Stephen Dresnick, M.D.</u> Signature of Authorized Individual</p> <p><u>Stephen Dresnick, M.D.</u> Printed Name of Authorized Individual</p> <p><u>President</u> Title of Authorized Individual</p> <p><u>January 21, 2010</u> Date</p>	

B4 (Official Form 4) (12/07)

United States Bankruptcy Court
Southern District of Florida

In re Navix Imaging Inc.

Debtor(s)

Case No. _____

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Carestream Health, Inc. 1756 Solution Center Chicago, IL 60677	Carestream Health, Inc. 1756 Solution Center Chicago, IL 60677			1,216.88
Charlotte CNTY Family YMCA 1777 Tamiami Trail Suite 501 Port Charlotte, FL 33948	Charlotte CNTY Family YMCA 1777 Tamiami Trail Suite 501 Port Charlotte, FL 33948			1,000.00
Delta Physician Placement P.O. Box 678082 Dallas, TX 75267	Delta Physician Placement P.O. Box 678082 Dallas, TX 75267			531.50
DHL Express P.O. Box 277290 Atlanta, GA 30384	DHL Express P.O. Box 277290 Atlanta, GA 30384			276.71
Florida Imaging Experts 825 N.E. 57th Court Fort Lauderdale, FL 33309	Florida Imaging Experts 825 N.E. 57th Court Fort Lauderdale, FL 33309			2,033.00
GE Healthcare Financial Services P.O. Box 641419 Pittsburgh, PA 15264	GE Healthcare Financial Services P.O. Box 641419 Pittsburgh, PA 15264			29,156.87
IBA Molecular No. Amer., Inc. P.O. Box 95000-2515 Philadelphia, PA 19195	IBA Molecular No. Amer., Inc. P.O. Box 95000-2515 Philadelphia, PA 19195			34,608.00
IBA Molecular No. Amer., Inc. P.O. Box 95000-2515 Philadelphia, PA 19195	IBA Molecular No. Amer., Inc. P.O. Box 95000-2515 Philadelphia, PA 19195			19,656.00
Joel Gellman, M.D., FACC 3011 N.E. 40th St. Fort Lauderdale, FL 33308	Joel Gellman, M.D., FACC 3011 N.E. 40th St. Fort Lauderdale, FL 33308			1,650.00
JRT Associates 5 Nepprham Avenue Suite 2B Elmsford, NY 10523	JRT Associates 5 Nepprham Avenue Suite 2B Elmsford, NY 10523			2,433.00
Mallinckrodt, Inc. P.O. Box 905835 Charlotte, NC 28290	Mallinckrodt, Inc. P.O. Box 905835 Charlotte, NC 28290			6,671.44

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

In re **Navix Imaging Inc.**

Case No. _____

Debtor(s) _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(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>
Office Depot P.O. Box 63324 Cincinnati, OH 45263	Office Depot P.O. Box 63324 Cincinnati, OH 45263			489.40
Petnet Solutions, Inc. P.O. Box 277293 Atlanta, GA 30384	Petnet Solutions, Inc. P.O. Box 277293 Atlanta, GA 30384			2,610.00
Phillips Medical Systems P.O. Box 100355 Atlanta, GA 30384	Phillips Medical Systems P.O. Box 100355 Atlanta, GA 30384			29,431.37
Same, Inc. 355 North Division Road Petoskey, MI 49770	Same, Inc. 355 North Division Road Petoskey, MI 49770			500.00
Staples Business Advantage Dept. ATL P.O. Box 530621 Atlanta, GA 30353	Staples Business Advantage Dept. ATL P.O. Box 530621 Atlanta, GA 30353			998.49
Staples Business Advantage Dept. ATL P.O. Box 530621 Atlanta, GA 30353	Staples Business Advantage Dept. ATL P.O. Box 530621 Atlanta, GA 30353			945.73
US Yellow P.O. Box 3110 Jersey City, NJ 07303	US Yellow P.O. Box 3110 Jersey City, NJ 07303			297.00
William Rogers, M.D. 3504 South Woodridge Road Birmingham, AL 35223	William Rogers, M.D. 3504 South Woodridge Road Birmingham, AL 35223			1,040.00
Xeg Imaging, LLC 7500 N.E. 4 Court Miami, FL 33138	Xeg Imaging, LLC 7500 N.E. 4 Court Miami, FL 33138			1,454.31

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

I, the 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 January 21, 2010Signature /s/ Stephen Dresnick, M.D.

**Stephen Dresnick, M.D.
President**

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.

BCBS of Florida
Department at 40328
Atlanta, GA 31192

Carestream Health, Inc.
1756 Solution Center
Chicago, IL 60677

Carment Maldonado
231 N.W. 53 Court
Pompano Beach, FL 33068

Charlotte CNTY Family YMCA
1777 Tamiami Trail
Suite 501
Port Charlotte, FL 33948

Delta Physician Placement
P.O. Box 678082
Dallas, TX 75267

DHL Express
P.O. Box 277290
Atlanta, GA 30384

Florida Imaging Experts
825 N.E. 57th Court
Fort Lauderdale, FL 33309

GE Healthcare Financial Services
P.O. Box 641419
Pittsburgh, PA 15264

Hernando Vilorio
132 Luca Lane
Kissimmee, FL 34743

IBA Molecular No. Amer., Inc.
P.O. Box 95000-2515
Philadelphia, PA 19195

Internal Revenue Service
P.O. Box 21126
Philadelphia, PA 19114-0326

Internal Revenue Service
P.O. Box 17167
Stop 5760
Fort Lauderdale, FL 33324

Joel Gellman, M.D., FACC
3011 N.E. 40th St.
Fort Lauderdale, FL 33308

JRT Associates
5 Nepprham Avenue
Suite 2B
Elmsford, NY 10523

Kenneth Giannetto
7356 Pinewalk Drive South
Pompano Beach, FL 33063

Mallinckrodt, Inc.
P.O. Box 905835
Charlotte, NC 28290

Marshall Medical
P.O. Box 940217
Maitland, FL 32794

Medical Dvice technologies
135 S. LaSalle
Dept. 2944
Chicago, IL 60674

Melody Laginess
10400 S. Tamiami Trail Lot 72
North Port, FL 34287

Millennium Medical Systems
8451 S.W. 10th Terrace
Miami, FL 33144

Office Depot
P.O. Box 63324
Cincinnati, OH 45263

Petnet Solutions, Inc.
P.O. Box 277293
Atlanta, GA 30384

Phillips Medical Systems
P.O. Box 100355
Atlanta, GA 30384

Pitney Bowes, Inc.
P.O. Box 856390
Louisville, KY 40285

Robles Elba
6261 Seminole Terrace
Pompano Beach, FL 33063

Same, Inc.
355 North Division Road
Petoskey, MI 49770

Special Assistant United State Atty.
Assc. Area Counsel (SBSE)
Ft. Lauderdale -Royal Palm Bldg.
1000 S. Pine Island Rd., #300
Ft. Lauderdale, FL 33324

Staples Business Advantage
Dept. ATL
P.O. Box 530621
Atlanta, GA 30353

The Honorable Eric Holder
United States Attorney General
950 Pennsylvania Avenue, N.W.
#4400
Washington, DC 20530

The Honorable R. Alexander Acosta
United States Attorney
Southern District of Florida
99 N.E. 4 St.
Miami, FL 33132

Tomas Garcia

US Yellow
P.O. Box 3110
Jersey City, NJ 07303

William Rogers, M.D.
3504 South Woodridge Road
Birmingham, AL 35223

Xeg Imaging, LLC
7500 N.E. 4 Court
Miami, FL 33138

Yellow Book
P.O. Box 6448
Carol Stream, IL 60197