B1 (Official Form 1)(12/11)									
			ruptcy of Florid					Volunta	ry Petition
Name of Debtor (if individual, enter Last, Fir Portable Medical Diagnostics, Inc				Name	of Joint De	ebtor (Spouse)	) (Last, First	, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						used by the J maiden, and		in the last 8 years ):	
Last four digits of Soc. Sec. or Individual-Tax (if more than one, state all) 65-0134197	payer I.D. (	(ITIN) No./0	Complete EI	IN Last for	our digits o	f Soc. Sec. or	Individual-	Taxpayer I.D. (ITIN	N) No./Complete EIN
Street Address of Debtor (No. and Street, City 8140 Belvedere Road Suite 4	, and State)	):		Street	Address of	Joint Debtor	(No. and Str	reet, City, and State	<del>;</del> ):
West Palm Beach, FL		_	ZIP Code	_					ZIP Code
County of Residence or of the Principal Place Palm Beach	of Busines		33411	Count	y of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Address of Debtor (if different from s	treet addres	ss):		Mailir	ng Address	of Joint Debte	or (if differen	nt from street addre	ess):
		г	ZIP Code	_					ZIP Code
Location of Principal Assets of Business Debt (if different from street address above):	or	<u> </u>		<b>I</b>					
Type of Debtor  (Form of Organization) (Check one hou)	T		of Business			•	-	otcy Code Under V	
(Form of Organization) (Check one box)  ☐ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  ☐ 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.)	Sing in 1 Rail Stoom	lth Care Bugle Asset Ro 1 U.S.C. § road ckbroker nmodity Broaring Bank	eal Estate as 101 (51B)	defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ CI of ☐ CI	hapter 15 Petition f a Foreign Main Pr hapter 15 Petition f a Foreign Nonmai	For Recognition roceeding For Recognition
Chapter 15 Debtors	Oth							e of Debts	
Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:	unde	(Check box tor is a tax-ex er Title 26 of	mpt Entity a, if applicable tempt organize the United State 1 Revenue Co	ation ates	defined "incurr	are primarily co d in 11 U.S.C. § red by an indivi- onal, family, or l	nsumer debts, 101(8) as dual primarily	for	Debts are primarily business debts.
Filing Fee (Check one b	ox)		Check of	one box:	1	Chap	ter 11 Debt	ors	
■ Full Filing Fee attached □ Filing Fee to be paid in installments (applicable attach signed application for the court's consider debtor is unable to pay fee except in installment Form 3A.	ation certifyi	ing that the	Check i	Debtor is not if: Debtor's agg	a small busing regate nonco \$2,343,300 (	ntingent liquida	efined in 11 U	J.S.C. § 101(51D).	insiders or affiliates) y three years thereafter).
Filing Fee waiver requested (applicable to chapt attach signed application for the court's consider			BB. A	Acceptances	of the plan w	this petition. were solicited pr S.C. § 1126(b).	epetition from	n one or more classes	of creditors,
Statistical/Administrative Information  ☐ Debtor estimates that funds will be availabed Debtor estimates that, after any exempt prothere will be no funds available for distributions.	perty is ex	cluded and	administrati		es paid,		THIS	S SPACE IS FOR CO	JRT USE ONLY
Estimated Number of Creditors	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				
Estimated Liabilities	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				

2/24/13 1:02PM

B1 (Official For	rm 1)(12/11)		Page 2
Voluntar	y Petition	Name of Debtor(s):  Portable Medical I	Diagnostics Inc
(This page mi	ust be completed and filed in every case)	Fortable Wedical L	Jiagnostics, inc.
1 0	All Prior Bankruptcy Cases Filed Within Las	t 8 Years (If more than tw	vo, attach additional sheet)
Location Where Filed:		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pe	ending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (	If more than one, attach additional sheet)
Name of Deb - None -	tor:	Case Number:	Date Filed:
District:		Relationship:	Judge:
	Exhibit A		Exhibit B s an individual whose debts are primarily consumer debts.)
forms 10K a pursuant to and is reque	pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 esting relief under chapter 11.)  A is attached and made a part of this petition.	I, the attorney for the pet have informed the petitio 12, or 13 of title 11, Unit	itioner named in the foregoing petition, declare that I ner that [he or she] may proceed under chapter 7, 11, ed States Code, and have explained the relief available I further certify that I delivered to the debtor the notice 42(b).
	E-1	l nibit C	
☐ Yes, and ☐ No.  (To be comp	or own or have possession of any property that posses or is alleged to describe the Exhibit C is attached and made a part of this petition.  Exhibit C is attached and made a part of this petition.  Exhibit C is attached and made a part of this petition.	nibit D  ach spouse must complete	· · · · · · · · · · · · · · · · · · ·
If this is a jo	-		
☐ Exhibit	D also completed and signed by the joint debtor is attached		lition.
	_	ng the Debtor - Venue	
•	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for		
	There is a bankruptcy case concerning debtor's affiliate, g		•
	Debtor is a debtor in a foreign proceeding and has its prin this District, or has no principal place of business or asset proceeding [in a federal or state court] in this District, or t sought in this District.	cipal place of business or s in the United States but i	principal assets in the United States in s a defendant in an action or
	Certification by a Debtor Who Reside	es as a Tenant of Resident blicable boxes)	itial Property
	Landlord has a judgment against the debtor for possession		pox checked, complete the following.)
	(Name of landlord that obtained judgment)		
	(Address of landlord)		
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment		
	Debtor has included in this petition the deposit with the coafter the filing of the petition.	·	
	Debtor certifies that he/she has served the Landlord with t	this certification. (11 U.S.C	C. § 362(1)).

B1 (Official Form 1)(12/11)

Page 3

## **Voluntary Petition**

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

#### 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.

 $\mathbf{X}$ 

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

#### Signature of Attorney\*

#### X /s/ Brett A. Elam

Signature of Attorney for Debtor(s)

#### Brett A. Elam 576808

Printed Name of Attorney for Debtor(s)

### The Law Offices of Brett A. Elam, P.A.

Firm Name

105 South Narcissus Suite 802

West Palm Beach, FL 33401

Address

Email: belam@brettelamlaw.com

561-833-1113 Fax: 561-833-1115

Telephone Number

# February 22, 2013

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 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 relief in accordance with the chapter of title 11, United States Code, specified in this petition.

# $\mathbf{X}$ /s/ Dennis F. Rosebrough

Signature of Authorized Individual

#### Dennis F. Rosebrough

Printed Name of Authorized Individual

#### President

Title of Authorized Individual

#### February 22, 2013

Date

Name of Debtor(s):

Portable Medical Diagnostics, Inc.

#### **Signatures**

#### Signature of a Foreign Representative

2/24/13 1:02PM

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 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

Printed Name of Foreign Representative

Date

## Signature of Non-Attorney Bankruptcy 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.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy 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.)

_	_
•	_

Date

Address

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 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.

**B4** (Official Form 4) (12/07)

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

In re	Portable Medical Diagnostics, Inc.			
		Debtor(s)	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]
American Express P.O. Box 650448 Dallas, TX 75265-0448	American Express P.O. Box 650448 Dallas, TX 75265-0448	Credit Card		43,824.72
American Radiology c/o Alan B. Gest, Esq. 20801 Biscayne Boulevard Suite 506 Miami, FL 33180-1400	American Radiology c/o Alan B. Gest, Esq. 20801 Biscayne Boulevard Miami, FL 33180-1400	Professional Services		114,000.00
Chase NA P.O. Box 15650 Wilmington, DE 19886	Chase NA P.O. Box 15650 Wilmington, DE 19886	Credit Crad		17,419.66
Customized Billing, Inc. 840 U.S. Highway One Suite 210 North Palm Beach, FL 33408	Customized Billing, Inc. 840 U.S. Highway One Suite 210 North Palm Beach, FL 33408	Billing Services		91,068.51
Dennis & MaryBeth Rosebrough 2898 Polo Island Drive Wellington, FL 33414	Dennis & MaryBeth Rosebrough 2898 Polo Island Drive Wellington, FL 33414	Business Ioan		460,000.00
Devereux & Company, CPA 307 North Main Street Saint Charles, MO 63301	Devereux & Company, CPA 307 North Main Street Saint Charles, MO 63301	Accounting Services		25,000.00
Evergreen Distributing 245 West Roosevelt Road #77 West Chicago, IL 60185	Evergreen Distributing 245 West Roosevelt Road #77 West Chicago, IL 60185	Professional Services		50,000.00
Fleetmatics 70 Walnit Street 2nd Floor Wellesley Hills, MA 02481-2102	Fleetmatics 70 Walnit Street 2nd Floor Wellesley Hills, MA 02481-2102			14,639.57
Florida Workers Comp Joint Underwriting 242 Lakefront Avenue P.O. Box 3556 Orlando, FL 32802-3556	Florida Workers Comp Joint Underwriting 242 Lakefront Avenue P.O. Box 3556 Orlando, FL 32802-3556			12,693.00

B4 (Offi	cial Form 4) (12/07) - Cont.		
In re	Portable Medical Diagnostics, Inc.	Case No.	
	Debtor(s)		

# LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(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]
GE Capital Printer Lease P.O. Box 740441 Atlanta, GA 30374-0441	GE Capital Printer Lease P.O. Box 740441 Atlanta, GA 30374-0441	Copy Services		33,194.48
Instant Imaging P.O. Box 502833 Indianapolis, IN 46250	Instant Imaging P.O. Box 502833 Indianapolis, IN 46250	Professional Services		300,000.00
J&S Business Group 3000 Hartley Road Suite 1 Jacksonville, FL 32257	J&S Business Group 3000 Hartley Road Suite 1 Jacksonville, FL 32257	Business debt		43,000.00
McCraney Property Company 2257 Vista Parkway Suite 17	McCraney Property Company 2257 Vista Parkway Suite 17 West Palm Beach, FL 33411			12,943.79
West Palm Beach, FL 33411 OberKaler Attorneys at Law 100 Light Street Baltimore, MD 21202	OberKaler Attorneys at Law 100 Light Street Baltimore, MD 21202			25,373.50
Portable Digital Radiology 5813 14th Street Zephyrhills, FL 33542	Portable Digital Radiology 5813 14th Street Zephyrhills, FL 33542			12,000.00
Regions Bank P.O. Box 1984 Birmingham, AL 35201	Regions Bank P.O. Box 1984 Birmingham, AL 35201			13,705.70 (0.00 secured)
Regions Bank P.O. Box 1984 Birmingham, AL 35201 Regions Bank	Regions Bank P.O. Box 1984 Birmingham, AL 35201 Regions Bank			(0.00 secured) 194,608.44
P.O. Box 1984 Birmingham, AL 35201	P.O. Box 1984 Birmingham, AL 35201	Pusiness leen		(0.00 secured)
Regions Bank P.O. Box 1984 Birmingham, AL 35201	Regions Bank P.O. Box 1984 Birmingham, AL 35201	Business loan		100,000.00
Southeast X-Ray 102 North 17th Street Ozark, AR 72949	Southeast X-Ray 102 North 17th Street Ozark, AR 72949	Professional Services		73,116.83

2/24/13 1:02PM

B4 (Offi	cial Form 4) (12/07) - Cont.		
In re	Portable Medical Diagnostics, Inc.	Case No.	
	Debtor(s)		

# LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

# 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	February 22, 2013	Signature	/s/ Dennis F. Rosebrough	
			Dennis F. Rosebrough	
			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.

Case 13-14112-PGH Doc 1 Filed 02/24/13 Page 7 of 13

<b>United States Bankruptcy Cour</b>	ct
Southern District of Florida	

re Portable Medical Diagnostics,	Inc.	Case No	
	Debtor		
		Chapter	11
LIS	ST OF EQUITY SECURITY	HOLDERS	
ollowing is the list of the Debtor's equity s	ecurity holders which is prepared in accord	ance with Rule 1007(a)(3	) for filing in this chapter 11
	J		, , , , , , , , , , , , , , , , , , , ,
Name and last known address	Security	Number	Kind of
or place of business of holder	Class	of Securities	Interest
Nama			
None			
DECLARATION UNDER PENA	LTY OF PERJURY ON BEHALF	F OF CORPORATION	ON OR PARTNERSH
I, the President of the corpora	ation named as the debtor in this case, d	leclare under penalty of	perjury that I have read th
	Holders and that it is true and correct to		
foregoing List of Equity Security			
foregoing List of Equity Security	a:	/ Dennis F. Rosebroug	<b>jh</b>
	Signature /s		
	De	nnis F. Rosebrough esident	

18 U.S.C §§ 152 and 3571.

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

In re	Portable Medical Diagnostics, Inc.	Debtor(s)	Case No. Chapter	11
	VERIFICAT	TION OF CREDITOR MA	TRIX	
	resident of the corporation named as the debto of my knowledge.	r in this case, hereby verify that the att	ached list of	creditors is true and correct to
Date:	February 22, 2013	/s/ Dennis F. Rosebrough  Dennis F. Rosebrough/President  Signer/Title		

AC X-Ray Corporation P.O. Box 560424 Miami, FL 33256-0424

Aflac 1932 Wynnton Road Columbus, GA 31999-0001

Alpine Haverhill Holdings, LLC 500 Haverhill Road West Palm Beach, FL 33411

American Express P.O. Box 650448 Dallas, TX 75265-0448

American Radiology c/o Alan B. Gest, Esq. 20801 Biscayne Boulevard Suite 506 Miami, FL 33180-1400

AT&T Advertising & Publishing 500 Columbia Drive West Palm Beach, FL 33409

B&J X-Ray 1638 Latham Road West Palm Beach, FL 33409

Chase NA P.O. Box 15650 Wilmington, DE 19886

CNA Liability Insurance 23453 Network Place Chicago, IL 60673-1234

Customized Billing, Inc. 840 U.S. Highway One Suite 210 North Palm Beach, FL 33408

Dennis & MaryBeth Rosebrough 2898 Polo Island Drive Wellington, FL 33414

Devereux & Company, CPA 307 North Main Street Saint Charles, MO 63301

DNS Services 4400 NE 77th Avenue Suite 275 Vancouver, WA 98662

Empire Pest Defense P.O. Box 541330 Lake Worth, FL 33454

Evergreen Distributing 245 West Roosevelt Road #77 West Chicago, IL 60185

Fleetmatics 70 Walnit Street 2nd Floor Wellesley Hills, MA 02481-2102

Florida Power & Light P.O. Box 025576 Miami, FL 33102

Florida Workers Comp Joint Underwriting 242 Lakefront Avenue P.O. Box 3556 Orlando, FL 32802-3556

Ford Credit P.O. Box 650575 Dallas, TX 75265

GE Capital Printer Lease P.O. Box 740441 Atlanta, GA 30374-0441

Hanover 440 Lincoln Street Worcester, MA 01653

Instant Imaging
P.O. Box 502833
Indianapolis, IN 46250

Internal Revenue Service 1111 Constituion Avenue NW Washington, DC 20224

Internal Revenue Service 99 NE 4th Street Miami, FL 33132

Internal Revenue Service P.O. Box 80110 Cincinnati, OH 45280

Internal Revenue Service Centralized Insolvency Operations P.O. Box 21126 Philadelphia, PA 19114

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

J&S Business Group 3000 Hartley Road Suite 1 Jacksonville, FL 32257

Jaken Medical 14279 Fern Avenue Chino, CA 91710

Landauer, Inc. 2 Science Road Glenwood, IL 60425-1586 McCraney Property Company 2257 Vista Parkway Suite 17 West Palm Beach, FL 33411

Michigan Commercial Insurance P.O. Box 80440 Lansing, MI 48908-0440

OberKaler Attorneys at Law 100 Light Street Baltimore, MD 21202

Oscar's Auto Repair 41 North Congress Avenue Bay 8A West Palm Beach, FL 33401

Palm Beach County - Tax Collector Attn: James Brako P.O. Box 3715 West Palm Beach, FL 33402-3715

Portable Digital Radiology 5813 14th Street Zephyrhills, FL 33542

Premium Assignment Corporation 3522 Thomasville Road Suite 400 Tallahassee, FL 32309

Quickshred 8202 South Northshore Drive Suite 201 Knoxville, TN 37922

Regions Bank P.O. Box 1984 Birmingham, AL 35201

Southeast X-Ray 102 North 17th Street Ozark, AR 72949 State of Florida Department of Management Services 4050 Esplanade Way Tallahassee, FL 32399-0950

Stephen Rosebrough 1373 Washburn Road Erie, CO 80516

Surfside Lubes, LLC 42 Boston Post Road East Marlborough, MA 01752

Verizon Wireless 12802 Tampa Oaks Boulevard Suite 450 Tampa, FL 33637

Viztek 2217 US Highway 70 East Garner, NC 27529

Wells Fargo Bank P.O. Box 6434 Carol Stream, IL 60197-6434

Westfield Insurance, Inc. P.O. Box 9001566 Louisville, KY 40290-1566

Windstream 301 North Main Street Suite 5000 Greenville, SC 29601-2153