Case 13-15278 Doc 1 Filed 03/08/13 Page 1 of 7

B1 (Official Form	1)(12/		United S			ruptcy of Florid					Vol	untary Petition
Name of Debtor (if individual, enter Last, First, Middle): A1A EMPLOYMENT SERVICES, LLC					_	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):						All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):						
Last four digits of (if more than one, state a 26-3237915	Soc. Sall)	ec. or Indi	vidual-Taxpa	yer I.D. (ITIN) No./0	Complete E	IN Last for	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)				
Street Address of 1000 WEST I POMPANO E	MCNA	B RD.,S	STE 320	nd State)	:		Street	Address of	Joint Debtor	(No. and St	reet, City, a	and State):
Pompano Be	each,	FL			Г	ZIP Code 33069						ZIP Code
County of Resider Broward	nce or o	of the Princ	cipal Place of	Business		33009	Count	y of Reside	ence or of the	Principal Pla	ace of Busi	ness:
Mailing Address of 333 NE 24TH SUITE # 311	I STR		rent from stre	eet addres	s):	7ID C- 1-		ng Address	of Joint Debt	or (if differe	nt from stre	,
Miami, FL					Γ:	ZIP Code 33137						ZIP Code
Location of Princi (if different from s												
	-	Debtor	1)	Nature of Business			Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)					
 (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.) 			(Check one box) ☐ Health Care Business ☐ Single Asset Real Estate as def in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank		defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl	hapter 15 P a Foreign hapter 15 P	etition for Recognition Main Proceeding retition for Recognition Nonmain Proceeding		
Cha	pter 15	Debtors		Other The Facility						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:			Tax-Exempt Entity (Check box, if applicable) □ Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		e) zation tates	defined "incurr	are primarily condinated in 11 U.S.C. § red by an individual, family, or	nsumer debts, 101(8) as dual primarily	for	Debts are primarily business debts.		
	Fili	ng Fee (Cl	neck one box)		Check	one box:	1	Chap	ter 11 Debt	ors	
□ 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. □ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. □ A pl					Debtor is not if: Debtor's aggare less than all applicable A plan is bein Acceptances	a small busing regate nonco \$2,343,300 (color boxes: ag filed with of the plan w	amount subject this petition.	defined in 11 United debts (exo to adjustment	J.S.C. § 1010 cluding debts on 4/01/13			
Statistical/Administrative Information ☐ Debtor estimates that funds will be available for distribution to unsecured credit ☐ Debtor estimates that, after any exempt property is excluded and administrative there will be no funds available for distribution to unsecured creditors.						es paid,		THIS	SPACE IS	FOR COURT USE ONLY		
Estimated Number 1- 50- 49 99	r of Cre	editors 100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
\$50,000 \$100	001 to 0,000	\$100,001 to \$500,000	\$500,001 to \$1	\$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 Liabiliti	001 to 0,000	\$100,001 to \$500,000	\$500,001 to \$1	\$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				

Case 13-15278 Doc 1 Filed 03/08/13 Page 2 of 7

B1 (Official Form 1)(12/11) Page 2 Name of Debtor(s): Voluntary Petition A1A EMPLOYMENT SERVICES, LLC (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission 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 pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. 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? Yes, and Exhibit C is attached and made a part of this petition. 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.) ☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ 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) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or 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) 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) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

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.

 $\mathbf{X}_{\overline{a}}$

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

X /s/ Timothy L. Grice, Esq. FBN:

Signature of Attorney for Debtor(s)

Timothy L. Grice, Esq. FBN: 47040

Printed Name of Attorney for Debtor(s)

Law Office of Timothy L. Grice, PA

Firm Name

319 Clemais Street - Ste. 213 West Palm Beach, FL 33401-4616

Address

Email: TGrice@TimothyGriceLaw.com

561-802-4474 Fax: 561-208-1303

Telephone Number

March 8, 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.

X /s/ VELDRIN FREEMON

Signature of Authorized Individual

VELDRIN FREEMON

Printed Name of Authorized Individual

Manager Member

Title of Authorized Individual

March 8, 2013

Date

Name of Debtor(s):

A1A EMPLOYMENT SERVICES, LLC

Signatures

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 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.

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.)

v	

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	A1A EMPLOYMENT SERVICES, LLC			
		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]
AT&T PO Box 405386	AT&T PO Box 405386			299.22
Atlanta, GA 30348-5262	Atlanta, GA 30348-5262			
Department of the Treasury□ Internal Revenue Service Center□ F940	Department of the Treasury□ Internal Revenue Service Center□ F940 Ogden, UT 84201-0039			207.30
Ogden, UT 84201-0039				222 527 42
Department of the Treasury□ Internal Revenue Service Center□ F941	Department of the Treasury□ Internal Revenue Service Center□ F941 Cincinnati, OH 45999-0005			236,507.48
Cincinnati, OH 45999-0005 Department of the Treasury	Department of the Treasury□			4 600 06
F1065	F1065			4,688.06
Ogden, UT 84201-0039	Ogden, UT 84201-0039			
Florida Department of Revenue 5050 West Tennessee Street□ Tallahassee, FL 32399-0100	Florida Department of Revenue 5050 West Tennessee Street□ Tallahassee, FL 32399-0100			167,189.26
Florida Power & Light General Miami Facility Miami, FL 33188-0001	Florida Power & Light General Miami Facility Miami, FL 33188-0001			34.84
Florida U.C. Fund 5050 W Tennessee St Bldg L Tallahassee, FL 32399-0180	Florida U.C. Fund 5050 W Tennessee St Bldg L Tallahassee, FL 32399-0180			5,746.36
Greater Pompano Beach Chamber of Commerc 2200 East Atlantic Blvd Pompano Beach, FL 33062	Greater Pompano Beach Chamber of Commerc 2200 East Atlantic Blvd Pompano Beach, FL 33062			300.00
Greenfield Software PO Box 61318 Durham, NC 27715-1318	Greenfield Software PO Box 61318 Durham, NC 27715-1318			248.75
Staples Business Advantage PO Box 405386 Atlanta, GA 30384-5386	Staples Business Advantage PO Box 405386 Atlanta, GA 30384-5386			877.74

Case 13-15278 Doc 1 Filed 03/08/13 Page 5 of 7

`	cial Form 4) (12/07) - Cont.		
In re	A1A EMPLOYMENT SERVICES, LLC	Case No.	
	Debtor(s)	_	

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(2)	(3)	(4)	(5)
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]
	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor Nature of claim (trade debt, bank loan, government contract,	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, unliquidated, disputed, or

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

I, the Manager Member 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	March 8, 2013	Signature	/s/ VELDRIN FREEMON
			VELDRIN FREEMON
			Manager Member

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.

AT&T PO Box 405386 Atlanta, GA 30348-5262

AT&T Communications Systems PO Box 79045 Baltimore, MD 21279-0045

Broward County Tax Collector 115 S Andrews Ave. Room A-100 Fort Lauderdale, FL 33301

City of Pompano Beach Business Tax Receipt PO Drawer 1300 Pompano Beach, FL 33061

Department of the Treasury□□
Internal Revenue Service Center□□
F941
Cincinnati, OH 45999-0005

Department of the Treasury \square F1065 Ogden, UT 84201-0039

Department of the Treasury III Internal Revenue Service Center IIII F940 Ogden, UT 84201-0039

Elite Services 5330 Bay Side Drive Orlando, FL 32819

Florida Department of Revenue 5050 West Tennessee Street□□ Tallahassee, FL 32399-0100

Florida Power & Light General Miami Facility Miami, FL 33188-0001 Florida U.C. Fund 5050 W Tennessee St Bldg L Tallahassee, FL 32399-0180

Greater Pompano Beach Chamber of Commerc 2200 East Atlantic Blvd Pompano Beach, FL 33062

Greenfield Software PO Box 61318 Durham, NC 27715-1318

Greter Dania Beach Chamber of Commerce PO Box 1017 Dania, FL 33004

Mc Nab Executive Plaza 1000 Westt Mc Nab Road Pompano Beach, FL 33069

Nengine2 Computer 1570 W 38th Place Unit #1 Hialeah, FL 33012

Physicians Health Center 20535 NW 2nd Ave., Suite $150\square$

Staples Business Advantage PO Box 405386 Atlanta, GA 30384-5386