

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name Feast House Restaurant, Inc.

2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 36-2784357

4. Debtor's address Principal place of business Mailing address, if different from principal place of business 2101 Grand Avenue Waukegan, IL 60085 Lake County Location of principal assets, if different from principal place of business

5. Debtor's website (URL)

6. Type of debtor Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) Partnership (excluding LLP) Other. Specify:

Debtor Feast House Restaurant, Inc. Case number (if known) _____
Name

7. Describe debtor's business

A. Check one:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. Check all that apply

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

7225

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- Chapter 7
- Chapter 9

Chapter 11. Check all that apply:

- Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- No.
- Yes.

If more than 2 cases, attach a separate list.

District _____ When _____ Case number _____

District _____ When _____ Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- No
- Yes.

List all cases. If more than 1, attach a separate list

Debtor _____ Relationship _____

District _____ When _____ Case number, if known _____

Debtor Feast House Restaurant, Inc. Case number (if known) _____
 Name

11. Why is the case filed in this district? *Check all that apply:*

Debtor has had its domicile, 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.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
 What is the hazard? _____

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other _____

Where is the property? _____
 Number, Street, City, State & ZIP Code

Is the property insured?

No

Yes. Insurance agency _____
 Contact name _____
 Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds *Check one:*

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

15. Estimated Assets

<input checked="" type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

16. Estimated liabilities

<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input checked="" type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

Debtor Feast House Restaurant, Inc. Case number (if known) _____
Name

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
I have been authorized to file this petition on behalf of the debtor.
I have examined the information in this petition and have a reasonable belief that the information is true and correct.
I declare under penalty of perjury that the foregoing is true and correct.
Executed on November 20, 2016
MM / DD / YYYY

/s/ Konstantinos "Gus" Roiniotis
Signature of authorized representative of debtor
Title President

Konstantinos "Gus" Roiniotis
Printed name

18. Signature of attorney

/s/ Joseph E. Cohen
Signature of attorney for debtor

Date November 20, 2016
MM / DD / YYYY

Joseph E. Cohen
Printed name

Cohen & Krol
Firm name

105 West Madison Street
Suite 1100
Chicago, IL 60602
Number, Street, City, State & ZIP Code

Contact phone 312-368-0300 Email address jcohen@cohenandkrol.com

3123243
Bar number and State

Fill in this information to identify the case:

Debtor name **Feast House Restaurant, Inc.**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known): _____

Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders 12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
AEP Energy c/o HRDC/Alan Niegorski 150 S. Wacker, Ste 2400 Chicago, IL 60606		open account				\$20,500.00
Christ Panos Foods Corp 1465 Industrail Drive Itasca, IL 60143		open account				\$9,004.06
City of Waukegan 100 N MLK Jr. Avenue Waukegan, IL 60085		water and sewage services				\$4,106.25
Economy Packing Co., Inc. 4501 W. 42nd Place Chicago, IL 60632		open account				\$1,853.65
Gordon Food Services, Inc. c/o NACM South Atlantic P.O. Box 547800 Orlando, FL 32854		open account				\$3,761.05
Ill. Dept. of Employment Security P.O. Box 3637 Springfield, IL 62708		3rd Qtr 2012 - 3rd Quarter 2016	Contingent			\$41,732.19
Internal Revenue Service P. O. BOX 804522 Cincinnati, OH 45999		9/2013 - 6/2016 Payroll taxes				\$81,654.36

Debtor **Feast House Restaurant, Inc.**
Name _____

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Internal Revenue Service P. O. BOX 804522 Cincinnati, OH 45999		Third Quarter 2016 941 liability				\$6,645.89
New Grand & Greenbay Currency Exch 3200 Grabnd Avenue Waukegan, IL 60085		Judgment	Disputed			\$3,700.79
Performance Food Service 5030 Baseline Road Montgomery, IL 60538		open account				\$16,732.03
Principis Capital LLC c/o Joseph Sussman 333 Pearsall Avenue, Ste 205 Cedarhurst, NY 11516		judgment				\$23,318.14
Sam's Meat Market 4501 W. 42nd Place Chicago, IL 60632		open account				\$10,962.04
US Food Service, Inc. c/o The CKB Law Firm 30 N LaSalle, Ste 1520 Chicago, IL 60602		open account				\$17,861.12
US Foods, Inc. P.O. Box 98420 Chicago, IL 60602		open account				\$11,515.22

Fill in this information to identify the case:

Debtor name Feast House Restaurant, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name Feast House Restaurant, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

Check if this is an amended filing

Official Form 206E/F
Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.

Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Ill. Dept. of Employment Security P.O. Box 3637 Springfield, IL 62708	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$41,732.19	\$41,732.19
	Date or dates debt was incurred _____ Last 4 digits of account number 0705 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: 3rd Qtr 2012 - 3rd Quarter 2016 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Internal Revenue Service P. O. BOX 804522 Cincinnati, OH 45999	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$81,654.36	\$81,654.36
	Date or dates debt was incurred _____ Last 4 digits of account number 4357 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: 9/2013 - 6/2016 Payroll taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Feast House Restaurant, Inc. Case number (if known) _____

Name _____

2.3	Priority creditor's name and mailing address Internal Revenue Service P. O. BOX 804522 Cincinnati, OH 45999	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,645.89	\$6,645.89
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Date or dates debt was incurred
09/2016

Basis for the claim:
Third Quarter 2016 941 liability

Last 4 digits of account number _____

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

No
 Yes

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address AEP Energy c/o HRDC/Alan Niegorski 150 S. Wacker, Ste 2400 Chicago, IL 60606	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$20,500.00	
	Date(s) debt was incurred _____	Basis for the claim: open account		
	Last 4 digits of account number 7648	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.2	Nonpriority creditor's name and mailing address Christ Panos Foods Corp 1465 Industrail Drive Itasca, IL 60143	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$9,004.06	
	Date(s) debt was incurred _____	Basis for the claim: open account		
	Last 4 digits of account number R500	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.3	Nonpriority creditor's name and mailing address City of Waukegan 100 N MLK Jr. Avenue Waukegan, IL 60085	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,106.25	
	Date(s) debt was incurred _____	Basis for the claim: water and sewage services		
	Last 4 digits of account number 9108	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.4	Nonpriority creditor's name and mailing address Economy Packing Co., Inc. 4501 W. 42nd Place Chicago, IL 60632	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,853.65	
	Date(s) debt was incurred _____	Basis for the claim: open account		
	Last 4 digits of account number 2000	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.5	Nonpriority creditor's name and mailing address Gordon Food Services, Inc. c/o NACM South Atlantic P.O. Box 547800 Orlando, FL 32854	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,761.05	
	Date(s) debt was incurred _____	Basis for the claim: open account		
	Last 4 digits of account number 8900	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Feast House Restaurant, Inc. Case number (if known) _____

Name

3.6 Nonpriority creditor's name and mailing address **New Grand & Greenbay Currency Exch**
3200 Grabnd Avenue
Waukegan, IL 60085
 Date(s) debt was incurred _____
 Last 4 digits of account number 6354

As of the petition filing date, the claim is: *Check all that apply.* **\$3,700.79**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Judgment
 Is the claim subject to offset? No Yes

3.7 Nonpriority creditor's name and mailing address **Performance Food Service**
5030 Baseline Road
Montgomery, IL 60538
 Date(s) debt was incurred _____
 Last 4 digits of account number 5400

As of the petition filing date, the claim is: *Check all that apply.* **\$16,732.03**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: open account
 Is the claim subject to offset? No Yes

3.8 Nonpriority creditor's name and mailing address **Principis Capital LLC**
c/o Joseph Sussman
333 Pearsall Avenue, Ste 205
Cedarhurst, NY 11516
 Date(s) debt was incurred _____
 Last 4 digits of account number 4415

As of the petition filing date, the claim is: *Check all that apply.* **\$23,318.14**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: judgment
 Is the claim subject to offset? No Yes

3.9 Nonpriority creditor's name and mailing address **Sam's Meat Market**
4501 W. 42nd Place
Chicago, IL 60632
 Date(s) debt was incurred _____
 Last 4 digits of account number 2101

As of the petition filing date, the claim is: *Check all that apply.* **\$10,962.04**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: open account
 Is the claim subject to offset? No Yes

3.10 Nonpriority creditor's name and mailing address **US Food Service, Inc.**
c/o The CKB Law Firm
30 N LaSalle, Ste 1520
Chicago, IL 60602
 Date(s) debt was incurred 12AR 1342
 Last 4 digits of account number 3908

As of the petition filing date, the claim is: *Check all that apply.* **\$17,861.12**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: open account
 Is the claim subject to offset? No Yes

3.11 Nonpriority creditor's name and mailing address **US Foods, Inc.**
P.O. Box 98420
Chicago, IL 60602
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$11,515.22**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: open account
 Is the claim subject to offset? No Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1 Illinois Dept. of Employment Securi 33 S State St. 10th Floor Chicago, IL 60603	Line <u>2.1</u>	<u>8469</u>
	<input type="checkbox"/> Not listed. Explain _____	

Debtor **Feast House Restaurant, Inc.** Case number (if known) _____
Name

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.2 Sorman & Frankel 180 N LaSalle Street, Ste 2700 Chicago, IL 60601	Line 3.6	—
<input type="checkbox"/> Not listed. Explain _____		

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. \$ <u>130,032.44</u>
5b. Total claims from Part 2	5b. + \$ <u>123,314.35</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ <u>253,346.79</u>

Fill in this information to identify the case:

Debtor name Feast House Restaurant, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* *Property*
(Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Lease for ice machine and two coolers**

State the term remaining **indefinite**

List the contract number of any government contract _____

**Empire Cooler
940 W. Chicago Ave.
Chicago, IL 60642**

Fill in this information to identify the case:

Debtor name Feast House Restaurant, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

Check if this is an amended filing

**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

United States Bankruptcy Court Northern District of Illinois

In re Feast House Restaurant, Inc.

Debtor(s)

Case No.

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 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:

Table with 3 rows: For legal services, I have agreed to accept \$ 13,000.00; Prior to the filing of this statement I have received \$ 13,000.00; Balance Due \$ 0.00

2. The source of the 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. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

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

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

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.

November 20, 2016

Date

/s/ Joseph E. Cohen

Joseph E. Cohen 3123243

Signature of Attorney

Cohen & Krol

105 West Madison Street

Suite 1100

Chicago, IL 60602

312-368-0300 Fax: 312-368-4559

jcohen@cohenandkrol.com

Name of law firm

**United States Bankruptcy Court
Northern District of Illinois**

In re Feast House Restaurant, Inc.

Debtor(s)

Case No.

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
------------------------------------------------------------	----------------	----------------------	------------------

Konstantinos "Gus" Roiniotis 4655 Celano Drive Libertyville, IL 60048		100% Shareholder	
--------------------------------------------------------------------------------------	--	-------------------------	--

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF 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 of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date November 20, 2016

Signature /s/ Konstantinos "Gus" Roiniotis
Konstantinos "Gus" Roiniotis

*Penalty for making a false statement of 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
Northern District of Illinois**

In re Feast House Restaurant, Inc. Debtor(s) Case No. _____
Chapter 11

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: 17

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: November 20, 2016

/s/ Konstantinos "Gus" Roiniotis
Konstantinos "Gus" Roiniotis/President
Signer/Title

AEP Energy
c/o HRDC/Alan Niegorski
150 S. Wacker, Ste 2400
Chicago, IL 60606

Christ Panos Foods Corp
1465 Industrail Drive
Itasca, IL 60143

City of Waukegan
100 N MLK Jr. Avenue
Waukegan, IL 60085

Economy Packing Co., Inc.
4501 W. 42nd Place
Chicago, IL 60632

Empire Cooler
940 W. Chicago Ave.
Chicago, IL 60642

Gordon Food Services, Inc.
c/o NACM South Atlantic
P.O. Box 547800
Orlando, FL 32854

Ill. Dept. of Employment Security
P.O. Box 3637
Springfield, IL 62708

Illinois Dept. of Employment Securi
33 S State St. 10th Floor
Chicago, IL 60603

Internal Revenue Service
P. O. BOX 804522
Cincinnati, OH 45999

Internal Revenue Service
P. O. BOX 804522
Cincinnati, OH 45999

New Grand & Greenbay Currency Exch
3200 Grabnd Avenue
Waukegan, IL 60085

Performance Food Service
5030 Baseline Road
Montgomery, IL 60538

Principis Capital LLC
c/o Joseph Sussman
333 Pearsall Avenue, Ste 205
Cedarhurst, NY 11516

Sam's Meat Market
4501 W. 42nd Place
Chicago, IL 60632

Sorman & Frankel
180 N LaSalle Street, Ste 2700
Chicago, IL 60601

US Food Service, Inc.
c/o The CKB Law Firm
30 N LaSalle, Ste 1520
Chicago, IL 60602

US Foods, Inc.
P.O. Box 98420
Chicago, IL 60602

**United States Bankruptcy Court
Northern District of Illinois**

In re **Feast House Restaurant, Inc.**

Debtor(s)

Case No.

Chapter **11**

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Feast House Restaurant, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

November 20, 2016

Date

/s/ Joseph E. Cohen

Joseph E. Cohen 3123243

Signature of Attorney or Litigant

Counsel for **Feast House Restaurant, Inc.**

Cohen & Krol

105 West Madison Street

Suite 1100

Chicago, IL 60602

312-368-0300 Fax:312-368-4559

jcohen@cohenandkrol.com