

B1 (Official Form 1)(1/08)

United States Bankruptcy Court Western District of North Carolina		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Italian Connection, 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): FDBA Wise Guys Pizza Inc.		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) 90-0412570		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): 528 Mocksville Highway Statesville, NC <div style="text-align: right; font-size: small;">ZIP Code 28625</div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right; font-size: small;">ZIP Code</div>
County of Residence or of the Principal Place of Business: Iredell		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): Jarbas DeAlmeida Managing Agent 168 Grayson Park Statesville, NC <div style="text-align: right; font-size: small;">ZIP Code 28625</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>
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 <hr/> 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 checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> 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 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		
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): Italian Connection, 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: - None -	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
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). X _____ 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.) <div style="text-align: center;"> _____ (Name of landlord that obtained judgment) </div> <div style="text-align: center;"> _____ (Address of landlord) </div>			
<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)).			

Voluntary Petition

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

Name of Debtor(s):
Italian Connection, Inc.

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

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

X _____
Signature of Debtor

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

X /s/ Jacqueline M. Druar _____
Signature of Attorney for Debtor(s)

Jacqueline M. Druar 31495 _____
Printed Name of Attorney for Debtor(s)

Law Office of Jacqueline M. Druar, PLLC _____
Firm Name

125-5 N Main St
Mooreville, NC 28115

Address

Email: jdruar@druarlaw.com
(704) 663-0772 Fax: (704) 663-0881

Telephone Number

October 29, 2009 _____
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/ Jarbas DeAlmeida _____
Signature of Authorized Individual

Jarbas DeAlmeida _____
Printed Name of Authorized Individual

President _____
Title of Authorized Individual

October 29, 2009 _____
Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 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 bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X _____

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach 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
Western District of North Carolina**

In re **Italian Connection, 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) <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>
Allied Interstate Inc. 31229 Cedar Balley Drive Westlake Village, CA 91362	Collections Allied Interstate Inc. 31229 Cedar Balley Drive Westlake Village, CA 91362 818-575-5400	Unknown	Disputed	1,632.00
AT & T PO Box 105262 Atlanta, GA 30348	Accounts receivable AT & T PO Box 105262 Atlanta, GA 30348 866-620-6000	Phone service		528.00
Benfield Sanitation 282 Scotts Creek Rd. Statesville, NC 28625	Accounts receivable Benfield Sanitation 282 Scotts Creek Rd. Statesville, NC 28625 704-872-9751	Garbage collection		910.00
City of Statesville Collections PO Box 1111 Statesville, NC 28687	Collections City of Statesville Collections PO Box 1111 Statesville, NC 28687 704-878-3564	Utility services		1,331.00
Financial Pacific Leasing 3455 S. 344th Way #300 Federal Way, WA 98001	Portfolio services Financial Pacific Leasing 3455 S. 344th Way #300 Federal Way, WA 98001 877-222-8558	Equipment lease		2,246.00
Ford Motor Credit One American Rd. Dearborn, MI 48126	Collections Ford Motor Credit One American Rd. Dearborn, MI 48126 Unknown	Vehicle expenses		6,500.00
Internal Revenue Service PO Box 21126 Philadelphia, PA 19114	Bankruptcy Reorganization Internal Revenue Service PO Box 21126 Philadelphia, PA 19114 828-271-4764	Quarterly withholding taxes		3,439.00

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

In re **Italian Connection, Inc.**

Case No. _____

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(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>
Iredell County Tax Collector C/O First Citizens Bank Statesville, NC 28687	Collections Iredell County Tax Collector C/O First Citizens Bank Statesville, NC 28687 704-878-3020	Real estate taxes		6,252.00
Johnson and Johnson PO Box 1376 Columbia, SC 29202	Accounts receivable Johnson and Johnson PO Box 1376 Columbia, SC 29202 800-487-7565 Ext 5012	Unknown account	Disputed	2,203.00
North Carolina Community Newspapers PO Box 27283 Richmond, VA 23261	Accounts receivable North Carolina Community Newspapers PO Box 27283 Richmond, VA 23261 704-873-1451	Advertising		798.00
North Carolina Dept. of Revenue PO Box 2110 Hickory, NC 28603	Collections North Carolina Dept. of Revenue PO Box 2110 Hickory, NC 28603 877-252-3052	State withholding taxes		516.00
North Carolina Dept. of Revenue PO Box 25000 Raleigh, NC 27640	Collections North Carolina Dept. of Revenue PO Box 25000 Raleigh, NC 27640 877 252 3052	State withholding taxes		5,344.00
Rapid Advance 7316 Wisconsin Ave. Suite 450 Bethesda, MD 20814	Tanisha Lucas Rapid Advance 7316 Wisconsin Ave. Suite 450 Bethesda, MD 20814 866-755-8152	Credit card advance on account service		10,961.00
Receivables Control Corp. PO Box 9658 Minneapolis, MN 55440	Sara Receivables Control Corp. PO Box 9658 Minneapolis, MN 55440 763-315-9600	Equipment purchase		736.00
Sysco 4500 Corporate Drive NW Concord, NC 28027	Thomas Hayes Sysco 4500 Corporate Drive NW Concord, NC 28027 704-786-4500	Return of bad check		1,268.00
The Caudle Law Firm PA 2101 Rexford Road, Suite 165W Charlotte, NC 28211	Foreclosure dept. The Caudle Law Firm PA 2101 Rexford Road, Suite 165W Charlotte, NC 28211 704-342-2330	Legal fees related to foreclosure action		2,500.00

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

In re **Italian Connection, 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>
Thomas Bookkeeping PO Box 539 Troutman, NC 28166	Donna Thomas Bookkeeping PO Box 539 Troutman, NC 28166 704-528-1020	Quarterly reports		695.00
Wachovia Bank PO Box 96074 Charlotte, NC 28296	Collections Wachovia Bank PO Box 96074 Charlotte, NC 28296 800-566-3862	Bank account		828.00
Wachovia Bank PO Box 96074 Charlotte, NC 28296	Collections Wachovia Bank PO Box 96074 Charlotte, NC 28296 877-270-6693	Line of credit		25,537.00
Waste Management PO Box 9001054 Louisville, KY 40290	Accounts receivable Waste Management PO Box 9001054 Louisville, KY 40290 866-475-0211	Garbage collection		1,441.00

**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 **October 29, 2009**

Signature **/s/ Jarbas DeAlmeida**

Jarbas DeAlmeida

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.

In re Italian Connection, Inc.

Case No. _____

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, 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 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Chister Inc. Leda Chister 528 Mocksville Highway Statesville, NC 28625	Lease from debtor-in-possession to Leda Chister, Chister Inc., for the restaurant portion of real property at 528 Mocksville Highway, Statesville, NC 28625 that has been in default for five (5) months. Debtor-in-possession has brought an action for ejectment against this tenant and REJECTS THIS LEASE.
Direct TV PO Box 60036 Los Angeles, CA 90060	Lease of equipment and contract for television services - Debtor-in-possession REJECTS THIS LEASE
Financial Pacific Leasing 3455 S. 344th Way #300 Federal Way, WA 98001	Lease of credit and debit card processing equipment - Debtor-in-possession REJECTS THIS LEASE.

**United States Bankruptcy Court
Western District of North Carolina**

In re Italian Connection, 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 Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<u>10,000.00</u>
Prior to the filing of this statement I have received.....	\$	<u>4,361.00</u>
Balance Due.....	\$	<u>5,639.00</u>

2. \$ 1,039.00 of the filing fee has been paid.
3. The source of the compensation paid to me was:
☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
☒ Debtor ☐ Other (specify):
5. ☒ 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.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [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.
7. 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.

Dated: October 29, 2009/s/ Jacqueline M. Druar

Jacqueline M. Druar 31495
 Law Office of Jacqueline M. Druar, PLLC
 125-5 N Main St
 Mooresville, NC 28115
 (704) 663-0772 Fax: (704) 663-0881
 jdruar@druarlaw.com

**United States Bankruptcy Court
Western District of North Carolina**

In re **Italian Connection, Inc.**

Debtor

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
Jarbas DeAlmeida 168 Grayson Park Statesville, NC 28625	Common Stock	100	100%

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 **October 29, 2009**

Signature **/s/ Jarbas DeAlmeida**

**Jarbas DeAlmeida
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.

**United States Bankruptcy Court
Western District of North Carolina**

In re **Italian Connection, Inc.**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **October 29, 2009**

/s/ Jarbas DeAlmeida

Jarbas DeAlmeida/President

Signer/Title

Allied Interstate Inc.
31229 Cedar Balley Drive
Westlake Village, CA 91362

AT & T
PO Box 105262
Atlanta, GA 30348

Bankruptcy Administrator
402 W. Trade St. Suite 200
Charlotte, NC 28202

Benfield Sanitation
282 Scotts Creek Rd.
Statesville, NC 28625

Cardservice Intl.
PO Box 17548
Denver, CO 80217

Carolinas Fire Systems
PO Box 872
Mocksville, NC 27028

Carpet Rentals Inc.
PO Box 5386
Statesville, NC 28687

Chister Inc.
Leda Chister
528 Mocksville Highway
Statesville, NC 28625

City of Statesville
Collections
PO Box 1111
Statesville, NC 28687

Direct TV
PO Box 60036
Los Angeles, CA 90060

Events Unlimited
232 Signal Hill Drive
Statesville, NC 28625

Financial Pacific Leasing
3455 S. 344th Way #300
Federal Way, WA 98001

Financial Pacific Leasing
3455 S. 344th Way #300
Federal Way, WA 98001

Ford Motor Credit
One American Rd.
Dearborn, MI 48126

Internal Revenue Service
PO Box 21126
Philadelphia, PA 19114

Iredell County Tax Collector
C/O First Citizens Bank
Statesville, NC 28687

Johnson and Johnson
PO Box 1376
Columbia, SC 29202

Ken Hoke
C/O Robert Gourley Sr.
Statesville, NC 28677

LDG Financial Services LLC
7001 Peachtree Industrial Blvd Ste 320
Norcross, GA 30092

Leda Chister
528 Mocksville Highway
Statesville, NC 28625

Merchant Processing Services
132 W. 36th St. 3rd Floor
New York, NY 10018

North Carolina Community Newspapers
PO Box 27283
Richmond, VA 23261

North Carolina Dept. of Revenue
PO Box 2110
Hickory, NC 28603

North Carolina Dept. of Revenue
PO Box 25000
Raleigh, NC 27640

North Carolina Employment Sec. Comm.
PO Box 26504
Raleigh, NC 27611

Piedmont Bank
PO Box 888
Elkin, NC 28621

PSNC Energy
C/O CCI
PO Box 212489
Augusta, GA 30917

Rapid Advance
7316 Wisconsin Ave. Suite 450
Bethesda, MD 20814

Receivables Control Corp.
PO Box 9658
Minneapolis, MN 55440

Ronald K. Carroll
C/O Robert Gourley Sr.
Statesville, NC 28677

Securities and Exchange Commission
Branch of Reorganization
Suite 1000
3475 Lennox Rd. NE
Atlanta, GA 30327

Sysco
4500 Corporate Drive NW
Concord, NC 28027

The Caudle Law Firm PA
2101 Rexford Road, Suite 165W
Charlotte, NC 28211

Thomas Bookkeeping
PO Box 539
Troutman, NC 28166

Wachovia Bank
PO Box 96074
Charlotte, NC 28296

Waste Management
PO Box 9001054
Louisville, KY 40290

Wise Guys Pizza Inc.
C/O 736 Jane Sowers Road
Statesville, NC 28625

**United States Bankruptcy Court
Western District of North Carolina**

In re **Italian Connection, 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 **Italian Connection, 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*]

October 29, 2009

Date

/s/ Jacqueline M. Druar

Jacqueline M. Druar 31495

Signature of Attorney or Litigant

Counsel for **Italian Connection, Inc.**

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