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Official Form 2	01		
United States Bankrupte Case number (If known):	_ District of New (State)	Jersey Chapter_11	neck if this is an nended filing
Fill in this information	to identify the case:		

Voluntary Petition for Non-Individuals Filing for Bankruptcy

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 the case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1.	Debtor's name	Kuzina Hospitality, Inc.	
2.	All other names debtor used in the last 8 years	Kuzina by Sofia	
	Include any assumed names, trade names, and doing business as names		
	Debtor's federal Employer Identification Number (EIN)	2 2 _ 0810173	
•	Debtor's address	Principal place of business	Mailing address, if different from principal plac of business
		404 Route 70 East Number Street	Number Street
		Name of the control o	
		Cherry Hill, NJ 08002	P.O. Box
		City State ZIP Code	City State ZIP Code
		Camden	Location of principal assets, if different from principal place of business
		County	Number Street
			City State ZIP Code
	Debtor's website (URL)		
	Type of debtor	☑*Corporation (including Limited Liability Company	(LLC) and Limited Liability Partnership (LLP))
	The of deptor	Partnership (excluding LLP)	
		Other. Specify:	

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Debtor	Kuzina Hosp	itality, Inc. Case number (if known)
7. De	escribe 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)) 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 .
Ba	nder which chapter of the ankruptcy Code is the abtor filing?	Chapter 7 Chapter 9 Chapter 11. Check all that apply: Chapter 12 Chapter 12. Check all that apply: Chapter 13. Check all that apply: Chapter 14. Check all that apply: Chapter 15. Check all that apply: Chapter 16. Chapter 17. Check all that apply: Chapter 18. Chapter 18. Chapter 18. Chapter 19.
file wi If r se 10. Ar pe	ere prior bankruptcy cases ed by or against the debtor thin the last 8 years? more than 2 cases, attach a parate list. re any bankruptcy cases ending or being filed by a	□ No
af Lis	st all cases. If more than 1, lach a separate list.	Pels. Debtor Relationship District When Case number, if known

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ebtor Name	-	Case number (if knd	
Why is the case filed in <i>this</i>	Check all that apply:		
district?		cile, principal place of business, or princ he date of this petition or for a longer pa	
	☐ A bankruptcy case conc	erning debtor's affiliate, general partner	, or partnership is pending in this district.
Does the debtor own or have possession of any real property or personal property	No Yes. Answer below for e	each property that needs immediate atte	ntion. Attach additional sheets if needed.
that needs immediate	Why does the pro	perty need immediate attention? (Che	eck all that apply.)
attention?	☐ It poses or is al	leged to pose a threat of imminent and	identifiable hazard to public health or safe
	•	zard?	
		physically secured or protected from the	
		shable goods or assets that could quickl kample, livestock, seasonal goods, mea options).	
	☐ Other		
	Where is the prop	ertv2	
	Wilele is the prop	Number Street	
		City	State ZIP Code
		Oity	State Zii Code
	is the property ins	sured?	
	□ No		
	Yes. Insurance a	gency	
	Contact nar	me	
	Phone		_
Statistical and adminis	trative information		
	-		· ·
. Debtor's estimation of	Check one:		
available funds	☐ Funds will be available f	or distribution to unsecured creditors.	
	After any administrative	expenses are paid, no funds will be ava	allable for distribution to unsecured credito
The state of the s			A CONTRACTOR OF THE CONTRACTOR
. Estimated number of	፭ 1-49	1,000-5,000	25,001-50,000
creditors	☐ 50-99 ☐ 100-199	5,001-10,000 10,001-25,000	☐ 50,001-100,000 ☐ More than 100,000
	200-999	10,001 20,000	— more than 100,000
The second secon	△ \$0-\$50,000	☐ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion
s. Estimated assets	\$50,001-\$100,000	\$1,000,001-\$10 million	\$1,000,000,001-\$1 billion
. Louinatou accorto		\$50,000,001-\$100 million	□ \$10,000,000,001-\$50 billion
. Lotimatou docoto	\$100,001-\$500,000	— \$00,000,001 \$100 111111011	
	\$100,001-\$500,000 \$500,001-\$1 million	\$100,000,001-\$500 million	☐ More than \$50 billion
			_

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Debtor Kuzina Hospitality, Inc.		Case number (if known)		
6. Estimated liabilities	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Request for Relief, Dec	claration, and Signatures			
		tement in connection with a bankrup 8 U.S.C. §§ 152, 1341, 1519, and 3		
 Declaration and signature of authorized representative of debtor 	The debtor requests relie petition.	of in accordance with the chapter of t	itle 11, United States Code, specified in this	
	I have been authorized to	o file this petition on behalf of the del	otor.	
	I have examined the inforcorrect.	rmation in this petition and have a re	asonable belief that the information is true	
	I declare under penalty of per	rjury that the foregoing is true and co	prrect.	
	Executed on $\frac{01/26}{MM / DD/Y}$	<u>16</u>		
	🗶 /s/ Sofia Ka	rakasidou So:	fia Karakasidou	
	Signature of authorized repre Title President	sentative of debtor Printed	d name	
. Signature of attorney	x /s/ Dino S.	Mantzas Date	01/26/16	
	Signature of attorney for deb	tor	MM / DD / YYYY	
	Dino S. Mant	tzas, Esquire		
	Printed name			
	Firm name 701 Route 73	N. Suite 1		
	Number Street Marlton		NJ 08053	
	City		ate ZIP Code	
	(856) 988-00 Contact phone		dino@dmantzaslaw.com	
	·			
	029121981 Bar number		NJ ate	

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Fill in this information to id	dentify the case:				
Debtor name Kuzina	Hospitality,				
United States Bankruptcy Court f	for the:	District of NJ (State)			
Case number (If known):		(o.c.to)			Check if this is an
Official Farms 000					amended filing
Official Form 206					
Schedule D: C	Creditors W	ho Have Claims S	Secured b	y Property	12/15
Be as complete and accura	ate as possible.				_
Do any creditors have cla	laims secured by debto	pr's property?			
No. Check this box and	nd submit page 1 of this f	form to the court with debtor's other	schedules. Debtor h	as nothing else to repor	t on this form.
Yes. Fill in all of the int					
Part 1: List Creditors	Who Have Secured	Claims		Column A	Column B
List in alphabetical order secured claim, list the cred		e secured claims. If a creditor has a claim.	more than one	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim
2.1 Creditor's name NJ Division	of Taxation	Describe debtor's property that is s			00.000
NO DIVISION	OI TAXACTOII	Personal propert	У	\$	<u>\$</u> 20,000
Creditor's mailing addres 50 Barrack S				-	
Trenton, NJ	08695			-	
		Describe the lien Tax lien			
Creditor's email address,	if known	Is the creditor an insider or related No	party?		
		Yes			
Date debt was incurred _	On going	Is anyone else liable on this claim?			
Last 4 digits of account number	0173	No Yes, Fill out Schedule H: Codebtors	(Official Form 206H).		
Do multiple creditors have same property?	e an interest in the	As of the petition filing date, the cla	aim is:		
☐ No ☑ Yes. Specify each creditor and its relative priority		Contingent Unliquidated Disputed			
2.2 Creditor's name		Describe debtor's property that is s	ubject to a lien		
				_\$	\$
Creditor's mailing addres	is			-	
				-	
Creditor's email address,	if known	Is the creditor an insider or related No	party?		
		☐ Yes			
Date debt was incurred		Is anyone else liable on this claim?			
Last 4 digits of account number		Yes. Fill out Schedule H: Codebtors	(Official Form 206H).		
Do multiple creditors have	e an interest in the	As of the petition filing date, the cla Check all that apply.	aim is:		
same property? ☐ No		☐ Contingent			
Yes. Have you already spe	ecified the relative	☐ Unliquidated☐ Disputed☐			
No. Specify each cre- creditor, and its r		,			
Yes. The relative prio specified on lines					
Total of the dollar amour Page, if any.	nts from Part 1, Colum	n A, including the amounts from t	he Additional	\$	

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Page 6 of 8 Document Debtor Case number (if known) Column B Column A **Additional Page** Part 1: Amount of claim Value of collateral that supports this Do not deduct the value claim of collateral. Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. Creditor's name Describe debtor's property that is subject to a lien Creditor's mailing address Describe the lien Is the creditor an insider or related party? Creditor's email address, if known ☐ No Yes Is anyone else liable on this claim? Date debt was incurred ☐ No Last 4 digits of account Yes. Fill out Schedule H: Codebtors (Official Form 206H). number As of the petition filing date, the claim is: Do multiple creditors have an interest in the Check all that apply. same property? Contingent ☐ No Unliquidated lacksquare Yes. Have you already specified the relative ☐ Disputed priority? ■ No. Specify each creditor, including this creditor, and its relative priority. ☐ Yes. The relative priority of creditors is specified on lines Creditor's name Describe debtor's property that is subject to a lien Creditor's mailing address Describe the lien Creditor's email address, if known Is the creditor an insider or related party? ☐ No Yes Is anyone else liable on this claim? Date debt was incurred ☐ No Last 4 digits of account Yes. Fill out Schedule H: Codebtors (Official Form 206H). number As of the petition filing date, the claim is: Do multiple creditors have an interest in the Check all that apply. same property? ☐ No Contingent Unliquidated ☐ Yes. Have you already specified the relative □ Disputed priority? ☐ No. Specify each creditor, including this creditor, and its relative priority.

Yes. The relative priority of creditors is specified on lines _____

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Debtor Name	Case numbe	(if known)	
Part 2: List Others to Be Notified for a Debt Already Listed in Part 1			
List in alphabetical order any others who must be notified for a debt already listed in Fagencies, assignees of claims listed above, and attorneys for secured creditors.			
If no others need to be notified for the debts listed in Part 1, do not fill out or submit the	his page. If addition	onal pages are needed, copy	this page.
Name and address		On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
		Line 2	
		Line 2	***************************************
	SOSSICIO PARTICIPA ALLA PARTICIPA AL	Line 2	esperimentementementemente (sales o tronspella de retriblinga e servicio, ejercon
MALAN FARMANDAN AND AND AND AND AND AND AND AND AN		Line 2	
	_	Line 2	
	and the second s		Marian 2010 (1995)
		Line 2	
		Line 2	AMA A MATERIAL AND A
		Line 2	
		Line 2	
		Line 2	
		Line 2	NOV. 464
		Line 2	
	- The state of the		
	and the second desired and the second	Line 2	
		Line 2	

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Fill in this information to identify the case and this filing:			
Debtor Name _	Kuzina Hospita	lity, Inc.	
United States Bankruptcy Court for the:		District of NJ	_
Case number (/	known):	,,	

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud 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.

Declaration and signature

I am the president, another officer, or an authorize another individual serving as a representative of the	d agent of the corporation; a member or an authorized agent of the partnership; or e debtor in this case.					
I have examined the information in the documents	checked below and I have a reasonable belief that the information is true and correct:					
Schedule A/B: Assets–Real and Personal Pro	perty (Official Form 206A/B)					
Schedule D: Creditors Who Have Claims Sec	ured by Property (Official Form 206D)					
☐ Schedule E/F: Creditors Who Have Unsecure	d Claims (Official Form 206E/F)					
☐ Schedule G: Executory Contracts and Unexp	Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)					
Schedule H: Codebtors (Official Form 206H)						
☐ Summary of Assets and Liabilities for Non-Inc	☐ Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)					
☐ Amended Schedule						
☐ Chapter 11 or Chapter 9 Cases: List of Credit	Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)					
Other document that requires a declaration_						
I declare under penalty of perjury that the foregoing	is true and correct.					
Executed on01/26/15	🕻 /s/ Sofia Karakasidou					
MM / DD / YYYY	Signature of individual signing on behalf of debtor					
	Sofia Karakasidou					
	Printed name					
	President					
	Position or relationship to debtor					