

Fill in this information to identify the case:

United States Bankruptcy Court for the:
DISTRICT OF NEW JERSEY

Case number (if known): _____ Chapter 11

Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/16

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

1. Debtor's name Too Fast Recovery 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) 1 3 - 4 2 6 4 7 7 7

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

528 South Blackhorse Pike
Number Street

Number Street

P.O. Box

Blackwood NJ 08012
City State ZIP Code

City State ZIP Code

Camden
County

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

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 Too Fast Recovery Inc. Case number (if known) _____

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>

____ - ____ - ____ - ____

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. District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

Debtor Too Fast Recovery Inc. Case number (if known) _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- No
- Yes. Debtor _____ Relationship _____
 District _____ When _____
 Case number, if known _____ MM / DD / YYYY

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

Debtor _____ Relationship _____
 District _____ When _____
 Case number, if known _____ MM / DD / YYYY

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 for distribution to unsecured creditors.

Debtor Too Fast Recovery Inc. Case number (if known) _____

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"/> 5,001-10,000 | <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 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 |
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 type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input checked="" type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

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 03/02/2017
MM / DD / YYYY

X /s/ Scott Schneider Signature of authorized representative of debtor
 Printed name Scott Schneider
 Title President

18. Signature of attorney X /s/ Harrison Ross Byck Signature of attorney for debtor Date 03/02/2017
MM / DD / YYYY

Harrison Ross Byck
Printed name
Kasuri Byck, L.L.C.
Firm name
340 Route 1 North
Number Street

Edison City NJ State 08817 ZIP Code

(732) 253-7630 Contact phone lawfirm@kasuribyck.com Email address
026831988 Bar number NJ State

Fill in this information to identify the case:

Debtor name Too Fast Recovery Inc.

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

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.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
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<p>2.1 Creditor's name <u>Ford Motor Credit</u></p> <p>Creditor's mailing address <u>PO Box 689007</u></p> <p><u>Franklin TN 37068-9007</u></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number <u>7 8 2 2</u></p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien <u>2 Trucks</u></p> <p>Describe the lien <u>Trucks</u></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><u>\$60,000.00</u></p>	<p><u>\$60,000.00</u></p>
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3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$340,000.00

Debtor Too Fast Recovery Inc. Case number (if known) _____

Part 1: Additional Page

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
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Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.2</p>	<p>Creditor's name <u>Santander Bank</u></p> <hr/> <p>Creditor's mailing address <u>3 Huntington Quardrangle, Ste. 101N</u></p> <hr/> <p><u>Melville</u> <u>NY</u> <u>11747</u></p> <hr/> <p>Creditor's email address, if known</p> <hr/> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number <u>6</u> <u>7</u> <u>1</u> <u>6</u></p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p>	<p>Describe debtor's property that is subject to a lien <u>6 Trucks</u></p> <hr/> <p>Describe the lien <u>Trucks</u></p> <hr/> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p><u>\$280,000.00</u></p>	<p><u>\$280,000.00</u></p>
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Santander Bank v. Too Fast Recovery, Inc.
Superior Court of New Jersey, Camden County,
Case No. CAM-L-004467-16

Debtor Too Fast Recovery Inc. Case number (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 Part 1. Examples of entities that may be listed are collection agencies, 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 this page. If additional 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
<u>Camden County</u> <u>Office of the Sheriff</u> <u>Room 100 - Courthouse</u> <u>520 Maret Street</u> <u>Camden NJ 08102</u>	Line <u>2.2</u>	<u>6</u> <u>7</u> <u>1</u> <u>6</u>
<u>Saldutti Law Group</u> <u>800 N. Kings Hwy</u> 	Line <u>2.2</u>	<u>6</u> <u>7</u> <u>1</u> <u>6</u>
<u>Cherry Hill NJ 08034</u>		
<u>Superior Court of New Jersey</u> <u>Camden County Chancery Division</u> <u>101 S. 5th Street</u> <u>Camden NJ 08103</u>	Line <u>2.2</u>	_____

Fill in this information to identify the case:

Debtor Too Fast Recovery Inc.

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

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 part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim Priority amount

<p>2.1 Priority creditor's name and mailing address</p> <p><u>Internal Revenue Service</u></p> <p><u>Centralized Insolvency Operation</u></p> <p><u>PO Box 7346</u></p> <p><u>Philadelphia</u> <u>PA</u> <u>19101-7346</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>8</u>)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p><u>Taxes</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><u>\$9,000.00</u></p>	<p><u>\$0.00</u></p>
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<p>2.2 Priority creditor's name and mailing address</p> <p><u>State of New Jersey</u></p> <p><u>PO Box 080</u></p> <p><u>Trenton</u> <u>NJ</u> <u>08646</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>8</u>)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p><u>Taxes</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><u>\$5,000.00</u></p>	<p><u>\$0.00</u></p>
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Debtor Too Fast Recovery Inc. Case number (if known) _____

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
<p>3.1 Nonpriority creditor's name and mailing address</p> <p><u>Andrew Viola, Esq.</u></p> <p><u>735 N. Black Horse Pike</u></p> <p>_____</p> <p><u>Runnemede NJ 08078</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Litigation for lawsuit against company _____</p>	<p>As of the petition filing date, the claim is: <u>\$4,000.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Attorney for - _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

<p>3.2 Nonpriority creditor's name and mailing address</p> <p><u>Atlantic City Electric</u></p> <p><u>PO Box 17006</u></p> <p>_____</p> <p><u>Wilmington DE 19850</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>6 0 3 5</u></p>	<p>As of the petition filing date, the claim is: <u>\$2,000.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Utilities _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
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<p>3.3 Nonpriority creditor's name and mailing address</p> <p><u>Berkshire Hathaway Guard Insurance Compa</u></p> <p><u>PO Box A-H 16 S. River St.</u></p> <p>_____</p> <p><u>Wilkes Barre PA 18703</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>5 6 4 2</u></p>	<p>As of the petition filing date, the claim is: <u>\$0.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Insurance _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
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<p>3.4 Nonpriority creditor's name and mailing address</p> <p><u>Can Capital / New Logic</u></p> <p><u>2015 Vaughn Road</u></p> <p>_____</p> <p><u>Kennesaw GA 30144</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>5 6 2 9</u></p>	<p>As of the petition filing date, the claim is: <u>\$0.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Loan _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
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Debtor Too Fast Recovery Inc. Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page. Amount of claim

3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:		\$0.00
	<u>Club Assist US LLC</u>	<i>Check all that apply.</i>		
	<u>13959 Collections Center Drive</u>	<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	<u>Chicago IL 60693</u>	Basis for the claim:		
		<u>Loan</u>		
	Date or dates debt was incurred _____	Is the claim subject to offset?		
	Last 4 digits of account number <u>s t 0 1</u>	<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:		\$40,000.00
	<u>Fruchter Weiss & Associates</u>	<i>Check all that apply.</i>		
	<u>726 Boulevard, Suite 19</u>	<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	<u>Kenilworth NJ 07033</u>	Basis for the claim:		
		<u>Loan</u>		
	Date or dates debt was incurred _____	Is the claim subject to offset?		
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

3.7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:		\$150,000.00
	<u>Independence Bank</u>	<i>Check all that apply.</i>		
	<u>1370 South County Trail</u>	<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	<u>East Greenwich RI 02818</u>	Basis for the claim:		
		<u>MCA Pay Off Loan</u>		
	Date or dates debt was incurred _____	Is the claim subject to offset?		
	Last 4 digits of account number <u>4 7 7 7</u>	<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

MCA Pay Off Loan 2016/Working Capital

3.8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:		\$0.00
	<u>Progressive Insurance</u>	<i>Check all that apply.</i>		
	<u>PO Box 105428</u>	<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	<u>Atlanta GA 30348-5428</u>	Basis for the claim:		
		<u>Insurance</u>		
	Date or dates debt was incurred _____	Is the claim subject to offset?		
	Last 4 digits of account number <u>3 1 2 0</u>	<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor Too Fast Recovery Inc. Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$3,000.00</u>
	<u>PSE&G</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 14444</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>New Brunswick NJ 08906</u>	Basis for the claim:	
		<u>Gas & Electric</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number <u>0 2 0 7</u>	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.10	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$14,400.00</u>
	<u>William Corsme</u>	<input type="checkbox"/> Contingent	
	<u>528 South Black Horse Pike</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Blackwood NJ 08012</u>	Basis for the claim:	
		<u>Contract/Lease</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Lease of 528 South Black Horse Pike, Blackwood, NJ 08012

Debtor Too Fast Recovery Inc. Case number (if known) _____

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 Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1 <u>Internal Revenue Service</u> <u>57 Haddon Field Road</u> _____ <u>Cherry Hill NJ 08002</u>	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain:	_____

Debtor Too Fast Recovery Inc. Case number (if known) _____

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. \$14,000.00

5b. Total claims from Part 2 5b. + \$213,400.00

5c. Total of Parts 1 and 2 5c.

<u>\$227,400.00</u>

Lines 5a + 5b = 5c.

Fill in this information to identify the case:		
Debtor name	<u>Too Fast Recovery Inc.</u>	
United States Bankruptcy Court for the:	<u>DISTRICT OF NEW JERSEY</u>	
Case number (if known)	Chapter	<u>11</u>

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, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?
- No. Check this box and file this form with the court 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 contracts or 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
<p>2.1 State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining _____</p> <p>List the contract number of any government contract _____</p>	<p>Service Contract with Clayton Police Dept Contract to be ASSUMED</p> <p><u>Clayton Police Dept</u></p> <p>_____</p> <p>_____</p>
<p>2.2 State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining _____</p> <p>List the contract number of any government contract _____</p>	<p>Service Contract with Glougester Township Police Dept Contract to be ASSUMED</p> <p><u>Glougester Township Police Dept</u></p> <p>_____</p> <p>_____</p>
<p>2.3 State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining _____</p> <p>List the contract number of any government contract _____</p>	<p>Lease of 528 South Black Horse Pike Blackwood, NJ 08012 Contract to be ASSUMED</p> <p><u>William Corsme</u></p> <p><u>528 South Black Horse Pike</u></p> <p>_____</p> <p>_____</p> <p><u>Blackwood NJ 08012</u></p>

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 Attorney for the Petitioner

UNITED STATES BANKRUPTCY COURT FOR THE

DISTRICT OF NEW JERSEY
 CAMDEN DIVISION

In re: Too Fast Recovery Inc. Case No.: _____
 SSN: 13-4264777
 SSN: _____

Debtor(s) **Numbered Listing of Creditors**

Address: **528 South Blackhorse Pike** Chapter: **11**
Blackwood, NJ 08012

	Creditor name and mailing address	Category of claim	Amount of claim
1.	Andrew Viola, Esq. 735 N. Black Horse Pike Runnemede, NJ 08078	Unsecured Claim	\$4,000.00
2.	Atlantic City Electric PO Box 17006 Wilmington DE 19850 6035	Unsecured Claim	\$2,000.00
3.	Berkshire Hathaway Guard Insurance Compa PO Box A-H 16 S. River St. Wilkes Barre, PA 18703 xxxxxx5642	Unsecured Claim	
4.	Camden County Office of the Sheriff Room 100 - Courthouse 520 Maret Street Camden, NJ 08102 xxx-x-xxxx67-16	Unsecured Claim	\$0.00
5.	Can Capital / New Logic 2015 Vaughn Road Kennesaw, GA 30144 5629	Unsecured Claim	
6.	Club Assist US LLC 13959 Collections Center Drive Chicago, IL 60693 xxxxxst01	Unsecured Claim	

in re: **Too Fast Recovery Inc.**

Debtor		Case No. (if known)
Creditor name and mailing address	Category of claim	Amount of claim
7. Ford Motor Credit PO Box 689007 Franklin, TN 37068-9007 7822	Secured Claim	\$60,000.00
8. Fruchter Weiss & Associates 726 Boulevard, Suite 19 Kenilworth, NJ 07033	Unsecured Claim	\$40,000.00
9. Independence Bank 1370 South County Trail East Greenwich, RI 02818 xx-xxx4777	Unsecured Claim	\$150,000.00
10. Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346	Priority Claim	\$9,000.00
11. Internal Revenue Service 57 Haddon Field Road Cherry Hill, NJ 08002	Unsecured Claim	\$0.00
12. Progressive Insurance PO Box 105428 Atlanta, GA 30348-5428 312-0	Unsecured Claim	
13. PSE&G PO Box 14444 New Brunswick, NJ 08906 0207	Unsecured Claim	\$3,000.00
14. Saldutti Law Group 800 N. Kings Hwy Cherry Hill, NJ 08034 xxx-x-xxxx67-16	Unsecured Claim	\$0.00
15. Santander Bank 3 Huntington Quadrangle, Ste. 101N Melville, NY 11747 xxx-x-xxxx67-16	Secured Claim	\$280,000.00

in re: **Too Fast Recovery Inc.**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
16.	State of New Jersey PO Box 080 Trenton, NJ 08646 -	Priority Claim	\$5,000.00
17.	Superior Court of New Jersey Camden County Chancery Division 101 S. 5th Street Camden, NJ 08103	Unsecured Claim	\$0.00
18.	William Corsme 528 South Black Horse Pike Blackwood, NJ 08012	Unsecured Claim	\$14,400.00

(The penalty for making a false statement or concealing property is a fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. secs. 152 and 3571.)

DECLARATION

I, **Too Fast Recovery Inc.**,
named as debtor in this case, declare under penalty of perjury that I have read the foregoing *Numbered Listing of Creditors*,
consisting of 3 sheets (including this declaration), and that it is true and correct to the best of my information and belief.

Debtor: /s/ Scott Schneider Date: 3/2/2017
Scott Schneider
President