Case 17-32926-SLM Doc 1 Filed 11/13/17 Entered 11/13/17 11:42:07 Desc Main Document Page 1 of 30

Fill in this information to identify your case:				
United States Bankruptcy Court for the:				
DISTRICT OF NEW JERSEY	_			
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	Doggy Care of Hoboken, LLC.	
2.	All other names debtor used in the last 8 years		
	Include any assumed names, trade names and <i>doing business as</i> names		
3.	Debtor's federal Employer Identification Number (EIN)	46-4170628	
4.	Debtor's address	Principal place of business	Mailing address, if different from principal place of business
		86 Lackawanna Avenue Woodland Park, NJ 07424	
		Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code
		Passaic	Location of principal assets, if different from principal
		County	place of business
			Number, Street, City, State & ZIP Code
5.	Debtor's website (URL)		
6.	Type of debtor	Corporation (including Limited Liability Compar	y (LLC) and Limited Liability Partnership (LLP))
		Partnership (excluding LLP)	
		□ Other. Specify:	

Debt	Case 17-32926-SLM Doc 1 Filed 11/13/17 Entered 11/13/17 11:42:07 Desc Main Document Page 2 of 30 Case number (if known)						
	Name	,			-		
7.	Describe debtor's business	<ul> <li>A. Check one:</li> <li>Health Care Business (as defined in 11 U.S.C. § 101(27A))</li> <li>Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))</li> <li>Railroad (as defined in 11 U.S.C. § 101(44))</li> <li>Stockbroker (as defined in 11 U.S.C. § 101(53A))</li> <li>Commodity Broker (as defined in 11 U.S.C. § 101(6))</li> <li>Clearing Bank (as defined in 11 U.S.C. § 781(3))</li> <li>None of the above</li> <li>B. Check all that apply</li> <li>Tax-exempt entity (as described in 26 U.S.C. §501)</li> </ul>					
			•		<b>U</b> ,	tment vehicle (as defined in 15 U.S.C. §80a-3)	
				isor (as defined in 15 U.		iment venicle (as defined in 15 0.5.C. §60a-5)	
		C. NAICS	6 (North Ai	•	cation System) 4-di	git code that best describes debtor. <u>naics-codes</u> .	
8.	Under which chapter of the Bankruptcy Code is the debtor filing?	Check on Chap Chap Chap	ter 7 ter 9 ter 11. <i>Ch</i>	<ul> <li>are less than \$2,5</li> <li>The debtor is a sn business debtor, a statement, and fee procedure in 11 U</li> <li>A plan is being file</li> <li>Acceptances of th accordance with 1</li> <li>The debtor is request to vol (Official Form 201)</li> </ul>	66,050 (amount sub nall business debtor attach the most rece deral income tax retu .S.C. § 1116(1)(B). ed with this petition. e plan were solicited 1 U.S.C. § 1126(b). hired to file periodic in ssion according to § <i>untary Petition for N</i> A) with this form.	uidated debts (excluding debts owed to insiders of oject to adjustment on 4/01/19 and every 3 years as defined in 11 U.S.C. § 101(51D). If the debto int balance sheet, statement of operations, cash- um or if all of these documents do not exist, follo d prepetition from one or more classes of credito reports (for example, 10K and 10Q) with the Sec § 13 or 15(d) of the Securities Exchange Act of 19 <i>lon-Individuals Filing for Bankruptcy under Chapt</i> ned in the Securities Exchange Act of 1934 Rule	after that). r is a small flow w the rs, in urities and 034. File the ter 11
9.	Were prior bankruptcy cases filed by or against the debtor within the last 8 years? If more than 2 cases, attach a	■ No. □ Yes.					
	separate list.	I	District _		When		
		I	District _		When	Case number	
10.	Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? List all cases. If more than 1,	□ No ■ Yes.					
	attach a separate list	I	Debtor	See Attachment		Relationship	
		I	District _		When	Case number, if known	

	Case 17-329	Docume		1:42:07 Desc Main				
Deb	tor Doggy Care of Hot	boken, LLC.	Case number ( <i>if known</i> )					
11.	Why is the case filed in this district?	preceding the date of this petitio	cipal place of business, or principal assets i n or for a longer part of such 180 days than ebtor's affiliate, general partner, or partnersl	in any other district.				
12.	Does the debtor own or have possession of any real property or personal property that needs immediate attention?	Why does the property nee	<ul> <li>Answer below for each property that needs immediate attention. Attach additional sheets if needed.</li> <li>Why does the property need immediate attention? (<i>Check all that apply.</i>)</li> <li>It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.</li> </ul>					
		<ul> <li>It needs to be physically secured or protected from the weather.</li> <li>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).</li> <li>Other</li> </ul>						
		Where is the property? Is the property insured? No Yes. Insurance agency Contact name	Number, Street, City, State & ZIP Code					
		Phone						
13	Statistical and admin	istrative information						
15.	available funds	Funds will be available for d	istribution to unsecured creditors. enses are paid, no funds will be available to	unsecured creditors.				
14.	Estimated number of creditors	<ul> <li>1-49</li> <li>50-99</li> <li>100-199</li> <li>200-999</li> </ul>	□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,000	□ 25,001-50,000 □ 50,001-100,000 □ More than100,000				
15.	Estimated Assets	<ul> <li>\$0 - \$50,000</li> <li>\$50,001 - \$100,000</li> <li>\$100,001 - \$500,000</li> <li>\$500,001 - \$1 million</li> </ul>	□ \$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				
16.	Estimated liabilities	<ul> <li>\$0 - \$50,000</li> <li>\$50,001 - \$100,000</li> <li>\$100,001 - \$500,000</li> <li>\$500,001 - \$1 million</li> </ul>	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	<ul> <li>□ \$500,000,001 - \$1 billion</li> <li>□ \$1,000,000,001 - \$10 billion</li> <li>□ \$10,000,000,001 - \$50 billion</li> <li>□ More than \$50 billion</li> </ul>				

Debtor Doggy Care of H Name	loboken, LLC.	Case number ( <i>if known</i> )					
Request for Relief,	, Declaration, and Signatures						
	d is a serious crime. Making a false statement in connection r up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, ar	n with a bankruptcy case can result in fines up to \$500,000 or d 3571.					
17. Declaration and signatur 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 ha I declare under penalty of perjury that the foregoing is Executed on <u>November 13, 2017</u> <u>MM / DD / YYYY</u>	ve a reasonable belief that the information is trued and correct. true and correct.					
	X       Is/ Stephen Anatro         Signature of authorized representative of debtor         Title       Managing Member	Stephen Anatro Printed name					
18. Signature of attorney	X /s/ David L. Stevens Signature of attorney for debtor David L. Stevens Printed name	Date November 13, 2017 MM / DD / YYYY					
	Scura, Wigfield, Heyer, Stevens & Cammarot Firm name 1599 Hamburg Turnpike Wayne, NJ 07470	a, LLP					
	Number, Street, City, State & ZIP CodeContact phone973-696-8391Email ad	dress ecfbkfilings@scuramealey.com					
	034422007 NJ						

Bar number and State

Debtor Name

Doggy Care of Hoboken, LLC.

Page 5 of 30 Case number (if known)

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
DISTRICT OF NEW JERSEY	
Case number (if known)	Chapter 11

Check if this an amended filing

# FORM 201. VOLUNTARY PETITION

# **Pending Bankruptcy Cases Attachment**

Debtor	201 Luiz Marin Realty, LLC			Relationship to you	Affiliate
District	New Jersey	When	10/23/17	Case number, if known	17-31443
Debtor	Doggy Care of Jersey City, LLC			Relationship to you	Affiliate
District	New Jersey	When	10/13/17	Case number, if known	17-30869
Debtor	Mesaw, LLC.			Relationship to you	Affiliate
District	New Jersey	When	11/13/17	Case number, if known	To Be Filed

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Debtor name Doggy Care of Hoboken, LLC.	
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY	
Case number (if known)	Check if this is an amended filing

# 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 authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the 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 Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- ☐ Amended Schedule
- 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 on November 13, 2017

#### X /s/ Stephen Anatro

Signature of individual signing on behalf of debtor

#### Stephen Anatro

Printed name

#### **Managing Member**

Position or relationship to debtor

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors** 

# Case 17-32926-SLM Doc 1 Filed 11/13/17 Entered 11/13/17 11:42:07 Desc Main Document Page 7 of 30

Fill in this information to identify the case:

 Debtor name
 Doggy Care of Hoboken, LLC.

 United States Bankruptcy Court for the:
 DISTRICT OF NEW JERSEY

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

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,	Indicate if claim is contingent, unliquidated, or disputed	If the claim is fully unsecured, fill in only unsecured claim amount.		
		and government contracts)		Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Bank of New Jersey 1365 Palisade Ave. Fort Lee, NJ 07024	David Fornal 609-452-8411	Loan				\$288,000.00
State of New Jersey Division of Employer Accounts P.O. Box 379 Trenton, NJ 08625-0379		Employee Tax				\$1,500.00
State of New Jersey Division of Taxation Compliance & Enforcement - Compliance 50 Barrack Street, 9th Floor Trenton, NJ 08695		Sales & Use Tax				\$20,000.00

# Case 17-32926-SLM Doc 1 Filed 11/13/17 Entered 11/13/17 11:42:07 Desc Main

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	Document Page 8 of 3	0	
mation to identify the case:			
Doggy Care of Hoboken, LLC			

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known)

Debtor name

Fill in this information to ide

Check if this is an amended filing

#### Official Form 206Sum Summary of Assets and Liabilities for Non-Individuals 12/15 Part 1: Summary of Assets Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B) 1. 1a. Real property: 0.00 Copy line 88 from Schedule A/B..... \$ 1b. Total personal property: 9,900.00 Copy line 91A from Schedule A/B..... \$ 1c. Total of all property: 9.900.00 Copy line 92 from Schedule A/B..... \$ Part 2: Summary of Liabilities Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) 2. 0.00 \$ Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D..... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) 3. 3a. Total claim amounts of priority unsecured claims: 21,500.00 Copy the total claims from Part 1 from line 5a of Schedule E/F..... \$ 3b. Total amount of claims of nonpriority amount of unsecured claims: 288,000.00 Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F..... +\$ Total liabilities 4 \_\_\_\_\_ 309,500.00 \$ Lines 2 + 3a + 3b

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Check if this is an amended filing
C

# Official Form 206A/B Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form. Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

□ No. Go to Part 2.

	es Fill in the information below.	a dabtar		Current value of
AILO	ash of cash equivalents owned of controlled by the			debtor's interest
3.	Checking, savings, money market, or financial br Name of institution (bank or brokerage firm)	okerage accounts (Identify all) Type of account	Last 4 digits of account number	
	3.1. Bank of New Jersey	Checking	0841	\$1,900.00
4.	Other cash equivalents (Identify all)			
5.	Total of Part 1.			\$1,900.00
	Add lines 2 through 4 (including amounts on any add	litional sheets). Copy the total to lin	e 80.	
Part 2:	Deposits and Prepayments			
6. <b>Does</b>	the debtor have any deposits or prepayments?			
	lo. Go to Part 3.			
■ Y	es Fill in the information below.			
7.	Deposits, including security deposits and utility of Description, including name of holder of deposit	deposits		
	7.1. Security Deposit - Held by Landlord			\$8,000.00
8.	Prepayments, including prepayments on executor Description, including name of holder of prepayment		axes, and rent	
9.	Total of Part 2.			\$8,000.00

Add lines 7 through 8. Copy the total to line 81.

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	Document Page 10 of 30
	Doggy Care of Hoboken, LLC.     Case number (If known)
	Accounts receivable
10. Does the	debtor have any accounts receivable?
No. Go	to Part 4.
🛛 Yes Fil	in the information below.
	nvestments
13. Does the	debtor own any investments?
No. Go	to Part 5.
	in the information below.
Part 5:	nventory, excluding agriculture assets
18. Does the	debtor own any inventory (excluding agriculture assets)?
No. Go	in the information below.
Part 6:	Farming and fishing-related assets (other than titled motor vehicles and land)
	debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?
27. 2000 110	
No. Go	
□ Yes Fil	in the information below.
	Office furniture, fixtures, and equipment; and collectibles
38. Does the	debtor own or lease any office furniture, fixtures, equipment, or collectibles?
No. Go	to Part 8.
🛛 Yes Fill	in the information below.
	Machinery, equipment, and vehicles
46. Does the	debtor own or lease any machinery, equipment, or vehicles?
No. Go	to Part 9.
	in the information below.
Part 9:	Real property
	debtor own or lease any real property?
	n to Part 10.
Dort 10	
	ntangibles and intellectual property debtor have any interests in intangibles or intellectual property?
59. DOES INC	
	to Part 11.
☐ Yes Fill	in the information below.
	All other assets
	debtor own any other assets that have not yet been reported on this form? interests in executory contracts and unexpired leases not previously reported on this form.
	ווונסרסוס ווו סאכטענטיץ טטווומטוס מוע עוובאטוובע ובמסבס ווט טרפיוטעטוץ ובטטוונע טון נווס וטוווו.

No. Go to Part 12.

 $\Box$  Yes Fill in the information below.

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

Case number (If known)

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#### Doggy Care of Hoboken, LLC. Debtor Name

Case number (If known)

#### Part 12: Summary

In Pa	rt 12 copy all of the totals from the earlier parts of the form Type of property	Current value of personal property	Current value of real property	
80.	Cash, cash equivalents, and financial assets. Copy line 5, Part 1	\$1,900.00		
81.	Deposits and prepayments. Copy line 9, Part 2.	\$8,000.00		
82.	Accounts receivable. Copy line 12, Part 3.	\$0.00		
83.	Investments. Copy line 17, Part 4.	\$0.00		
84.	Inventory. Copy line 23, Part 5.	\$0.00		
85.	Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00		
86.	Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00		
87.	Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$0.00		
88.	Real property. Copy line 56, Part 9	>		\$0.00
89.	Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00		
90.	All other assets. Copy line 78, Part 11.	+\$0.00		
91.	Total. Add lines 80 through 90 for each column	\$9,900.00	+ 91b.	\$0.00
92.	Total of all property on Schedule A/B. Add lines 91a+91b=92	2		\$9,900.00

Official Form 206A/B Schedule A/B Assets - Real and Personal Property Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

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Fill	in this information to identify the c				
Det	otor name Doggy Care of Hobo	ken, LLC.			
Uni	ted States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Cas	se number (if known)				
				_	Check if this is an amended filing
				•	amended hing
	icial Form 206D				
Sc	hedule D: Creditors	Who Have Claims Secured by Pro	operty		12/15
	s complete and accurate as possible.				
	any creditors have claims secured by $\Box$ No. Check this box and submit pa	ge 1 of this form to the court with debtor's other schedules. I	Debtor has not	ning else to	report on this form
	<ul> <li>Yes. Fill in all of the information be</li> </ul>	•			
Par					
		o have secured claims. If a creditor has more than one secured	Column A		Column B
clair	n, list the creditor separately for each claim	l.	Amount of cl		Value of collateral that supports this
	7		Do not deduct of collateral.		claim
2.1	Creditor's Name	Describe debtor's property that is subject to a lien Dog Grooming Equipment		\$0.00	\$0.00
	175 North Patrick Blvd.,				
	Suite 140 Brookfield, WI 53045				
	Creditor's mailing address	Describe the lien			
		Lessee Is the creditor an insider or related party?			
		No			
	Creditor's email address, if known	☐ Yes Is anyone else liable on this claim?			
	Date debt was incurred				
		Yes. Fill out Schedule H: Codebtors (Official Form 206H)			
	Last 4 digits of account number				
	Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is: Check all that apply			
	■ No				
	Yes. Specify each creditor, including this creditor and its relative	Unliquidated Disputed			
	priority.				
2.2	Tiger Leasing	Describe debtor's property that is subject to a lien		\$0.00	\$0.00
		HVAC Equipment			
	33 West 19th Street, Floor 4 New York, NY 10011				
	Creditor's mailing address	Describe the lien			
		Lessee Is the creditor an insider or related party?			
		No			
	Creditor's email address, if known	☐ Yes Is anyone else liable on this claim?			
	Date debt was incurred				
		Yes. Fill out Schedule H: Codebtors (Official Form 206H)			
	Last 4 digits of account number				
	Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is: Check all that apply			

## Schedule D: Creditors Who Have Claims Secured by Property

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Debtor Doggy Care of Hobo	ken, LLC.	Case number (if know)	
Name			
No	Contingent		
Yes. Specify each creditor,	Unliquidated		
including this creditor and its relat priority.	ive Disputed		
3. Total of the dollar amounts from	Part 1, Column A, including the amounts fr	om the Additional Page, if any. \$0.00	1
Part 2: List Others to Be Notifie	ed for a Debt Already Listed in Part 1		-
List in alphabetical order any others a assignees of claims listed above, and		ed in Part 1. Examples of entities that may be listed a	are collection agencies,
If no others need to notified for the d	ebts listed in Part 1, do not fill out or subm	it this page. If additional pages are needed, copy this	s 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

#### Case 17-32026-SLM Doc 1 Eiled 11/13/17 Entered 11/13/17 11:42:07 Desc Main

	Document Page 15 of 30		
Fill in this information to identify the case:			
Debtor name Doggy Care of Hoboken, LL	С.	_	
United States Bankruptcy Court for the: DISTRIC	CT OF NEW JERSEY	_	
Case number (if known)			
		Check if amende	
			u ming
Official Form 206E/F			
Schedule E/F: Creditors Wr			12/15
List the other party to any executory contracts or unex Personal Property (Official Form 206A/B) and on Scher 2 in the boxes on the left. If more space is needed for I	or creditors with PRIORITY unsecured claims and Part 2 for cre spired leases that could result in a claim. Also list executory co dule G: Executory Contracts and Unexpired Leases (Official Fo Part 1 or Part 2, fill out and attach the Additional Page of that Pa executed Claims	ntracts on <i>Schedule A/B: A</i> rm 206G). Number the entr	Assets - Real and
Part 1: List All Creditors with PRIORITY Uns			
1. Do any creditors have priority unsecured clain	ns? (See 11 U.S.C. § 507).		
No. Go to Part 2.			
Yes. Go to line 2.			
<ol> <li>List in alphabetical order all creditors who ha with priority unsecured claims, fill out and attach</li> </ol>	ve unsecured claims that are entitled to priority in whole or in the Additional Page of Part 1.		han 3 creditors Priority amount
2.1 Priority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,500.00	\$0.00
State of New Jersey Division of	Check all that apply.		
Employer Accounts			
PO Box 379	Contingent		
P.O. Box 379 Trenton, NJ 08625-0379	Contingent Unliquidated Disputed		
Trenton, NJ 08625-0379	Unliquidated Disputed Basis for the claim:		
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number         Specify Code subsection of PRIORITY	Unliquidated Disputed Basis for the claim: Employee Tax		
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number	Unliquidated Usipputed Basis for the claim: Employee Tax Is the claim subject to offset?		
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number         Specify Code subsection of PRIORITY         unsecured claim: 11 U.S.C. § 507(a) (8)	Unliquidated Disputed Basis for the claim: Employee Tax Is the claim subject to offset? No Yes	\$20.000.00	\$20.000.00
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number         Specify Code subsection of PRIORITY         unsecured claim: 11 U.S.C. § 507(a) (8)	Unliquidated Disputed Basis for the claim: Employee Tax Is the claim subject to offset? No Yes As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$20,000.00	\$20,000.00
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number         Specify Code subsection of PRIORITY         unsecured claim: 11 U.S.C. § 507(a) (8)         2.2         Priority creditor's name and mailing address         State of New Jersey Division of         Taxation	□ Unliquidated         □ Disputed         Basis for the claim:         Employee Tax         Is the claim subject to offset?         ■ No         □ Yes         As of the petition filing date, the claim is:         Check all that apply.         □ Contingent	\$20,000.00	\$20,000.00
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number         Specify Code subsection of PRIORITY         unsecured claim: 11 U.S.C. § 507(a) (8)         2.2         Priority creditor's name and mailing address         State of New Jersey Division of         Taxation         Compliance & Enforcement -	<ul> <li>□ Unliquidated</li> <li>□ Disputed</li> <li>□ Basis for the claim:</li> <li>Employee Tax</li> <li>Is the claim subject to offset?</li> <li>■ No</li> <li>□ Yes</li> <li>As of the petition filing date, the claim is:</li> <li>Check all that apply.</li> <li>□ Contingent</li> <li>□ Unliquidated</li> </ul>	\$20,000.00	\$20,000.00
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number         Specify Code subsection of PRIORITY         unsecured claim: 11 U.S.C. § 507(a) (8)         2.2         Priority creditor's name and mailing address         State of New Jersey Division of         Taxation	□ Unliquidated         □ Disputed         Basis for the claim:         Employee Tax         Is the claim subject to offset?         ■ No         □ Yes         As of the petition filing date, the claim is:         Check all that apply.         □ Contingent	\$20,000.00	\$20,000.00
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number         Specify Code subsection of PRIORITY         unsecured claim: 11 U.S.C. § 507(a) (8)         2.2         Priority creditor's name and mailing address         State of New Jersey Division of         Taxation         Compliance & Enforcement -         Compliance         50 Barrack Street, 9th Floor	<ul> <li>□ Unliquidated</li> <li>□ Disputed</li> <li>□ Basis for the claim:</li> <li>Employee Tax</li> <li>Is the claim subject to offset?</li> <li>■ No</li> <li>□ Yes</li> <li>As of the petition filing date, the claim is:</li> <li>Check all that apply.</li> <li>□ Contingent</li> <li>□ Unliquidated</li> </ul>	\$20,000.00	\$20,000.00
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number         Specify Code subsection of PRIORITY         unsecured claim: 11 U.S.C. § 507(a) (8)         2.2         Priority creditor's name and mailing address         State of New Jersey Division of         Taxation         Compliance & Enforcement -         Compliance         50 Barrack Street, 9th Floor         Trenton, NJ 08695	□ Unliquidated         □ Disputed         Basis for the claim:         Employee Tax         Is the claim subject to offset?         ■ No         □ Yes         As of the petition filing date, the claim is: <i>Check all that apply.</i> □ Contingent         □ Unliquidated         □ Disputed	 \$20,000.00	\$20,000.00
Trenton, NJ 08625-0379         Date or dates debt was incurred         Last 4 digits of account number         Specify Code subsection of PRIORITY         unsecured claim: 11 U.S.C. § 507(a) (8)         2.2         Priority creditor's name and mailing address         State of New Jersey Division of         Taxation         Compliance & Enforcement -         Compliance         50 Barrack Street, 9th Floor         Trenton, NJ 08695         Date or dates debt was incurred	□ Unliquidated         □ Disputed         Basis for the claim:         Employee Tax         Is the claim subject to offset?         ■ No         □ Yes         As of the petition filing date, the claim is:         Check all that apply.         □ Contingent         □ Unliquidated         □ Disputed         □	\$20,000.00	\$20,000.00

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.

51875

Amount of claim

Ca	ase 17-32926-SLM	Doc 1 Filed Docum	11/13/17 nent Pa	Entered 11/13/17 11:42:07 ge 16 of 30	Desc Main
	oggy Care of Hoboken, L	LC.		Case number (if known)	
	<sup>me</sup> riority creditor's name and maili	ng address	As of the petition	on filing date, the claim is: Check all that apply.	\$288,000.00
	k of New Jersey		Contingent		
	5 Palisade Ave.		Unliquidated		
Fort	Fort Lee, NJ 07024		Disputed		
Date(	s) debt was incurred _		Basis for the cl	aim: Loan_	
Last 4	4 digits of account number _		Is the claim subj	ect to offset?	
	st Others to Be Notified Abo		-	<b>1 and 2.</b> Examples of entities that may be listed ar	
	claims listed above, and attorneys			and 2. Examples of entities that may be listed at	e collection agencies,

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	Maselli Warren, P.C. 600 Alexander Road, Suite 3-4A	Line <u>3.1</u>	_
	Attn. David Fornal Princeton, NJ 08540	Not listed. Explain	

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

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

- 5a. Total claims from Part 1 5b. Total claims from Part 2
- 5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.

		Total of claim amounts
5a.		\$ 21,500.00
5b.	+	\$ 288,000.00
5c.		\$ 309,500.00

Case 17-32926-SLM	Doc 1	Filed 11/13	17	Entered 11/13/17 11:42:07	Desc Main
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nent	Page	17	of 3

Check if this is an amended filing

12/15

# Official Form 206G

Doggy Care of Hoboken, LLC.

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Fill in this information to identify the case:

Debtor name

Case number (if known)

**Schedule G: Executory Contracts and Unexpired Leases** 

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

- Does the debtor have any executory contracts or unexpired leases? 1.
  - □ 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 leas	ses	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	Landlord	
	State the term remaining		Anthony Pasculli
	List the contract number of any government contract		712 Jefferson Avenue Cliffside Park, NJ 07010
2.2.	State what the contract or lease is for and the nature of the debtor's interest	Equipment	
	State the term remaining		Malassing
	List the contract number of any government contract		M2 Leasing 175 North Patrick Blvd., Suite 140 Brookfield, WI 53045
2.3.	State what the contract or lease is for and the nature of the debtor's interest	Equipment	
	State the term remaining		Tiger Leasing
	List the contract number of any government contract		33 West 19th Street, Floor 4 New York, NY 10011

# Case 17-32926-SLM Doc 1 Filed 11/13/17 Entered 11/13/17 11:42:07 Desc Main

□ D \_\_\_\_ □ E/F \_\_\_\_

□ G \_\_\_\_\_

	Case 17-52920-51		Document Pa	ade 18 of 30	.42.07	Desc Main
Fill in th	is information to identify th					
Debtor n	ame Doggy Care of He	oboken, LLC.				
United S	tates Bankruptcy Court for the					
Case nui	mber (if known)					
						Check if this is an amended filing
					1	amended ming
Officia	al Form 206H					
Sche	dule H: Your Co	odebtors				12/15
	mplete and accurate as po al Page to this page.	ssible. If more sp	ace is needed, copy th	ne Additional Page, numbering t	he entries o	onsecutively. Attach the
1. De	o you have any codebtors?	?				
🛛 No. C	heck this box and submit thi	s form to the court	t with the debtor's other s	schedules. Nothing else needs to b	be reported	on this form.
Yes						
2. In Co	olumn 1, list as codebtors	all of the people	or entities who are also	o liable for any debts listed by th	ne debtor in	the schedules of
cred	itors, Schedules D-G. Inclu	de all guarantors	and co-obligors. In Colur	mn 2, identify the creditor to whom	the debt is	owed and each schedule
on w	hich the creditor is listed. If t	the codebtor is liab	ble on a debt to more that	in one creditor, list each creditor se		Column 2
	Column 1: Codebtor			Column 2: Credito	r	oolullin 2.
	Column 1: Codebtor			Column 2: Credito	r	
	Column 1: Codebtor			Column 2: Credito	r	
	Column 1: Codebtor	Mailing Address	S	Column 2: Credito Name	r	Check all schedules that apply:

Princeton Junction, NJ 08550

2.2	Nirav Patel	800 Jackson Street, PH2 Hoboken, NJ 07030	Bank of New Jersey	□ D □ E/F □ G
2.3	Stephen & Maria Anatro	207 The Promonade Edgewater, NJ 07020	Bank of New Jersey	□ D □ E/F □ G
2.4	Stephen & Maria Anatro	207 The Promonade Edgewater, NJ 07020	M2 Leasing	■ D <u>2.1</u> □ E/F □ G
2.5	Stephen & Maria Anatro	207 The Promonade Edgewater, NJ 07020	Tiger Leasing	■ D <u>2.2</u> □ E/F □ G

Konzelmann

# Case 17-32926-SLM Doc 1 Filed 11/13/17 Entered 11/13/17 11:42:07 Desc Main Document Page 19 of 30

Fill in this information to identify the case:			
Debtor name Doggy Care of Hoboken, LLC.			
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			
Case number (if known)			
			Check if this is an amended filing
			-
Official Form 207			
Statement of Financial Affairs for Non-Individ			04/16
The debtor must answer every question. If more space is needed, attach a write the debtor's name and case number (if known).	separate sheet to this form. C	On the top of	any additional pages,
Part 1: Income			
1. Gross revenue from business			
□ None.			
Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year	Sources of revenue Check all that apply		Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	Operating a business		\$120,000.00
From 1/01/2017 to Filing Date	Other		
For prior year: From 1/01/2016 to 12/31/2016	Operating a business		\$151,000.00
	Other		
For year before that:	Operating a business		\$151,000.00
From 1/01/2015 to 12/31/2015	Other		
<ul> <li>Non-business revenue</li> <li>Include revenue regardless of whether that revenue is taxable. Non-busines and royalties. List each source and the gross revenue for each separately. I</li> <li>None.</li> </ul>			ney collected from lawsuits,
	Description of sources of	revenue	Gross revenue from each source (before deductions and exclusions)
Part 2: List Certain Transfers Made Before Filing for Bankruptcy			
3. Certain payments or transfers to creditors within 90 days before filing List payments or transfersincluding expense reimbursementsto any credi filing this case unless the aggregate value of all property transferred to that and every 3 years after that with respect to cases filed on or after the date of	tor, other than regular employee creditor is less than \$6,425. (Thi		
□ None.			
Creditor's Name and Address Dates	Total amount of value	Reasons fo Check all the	r payment or transfer at apply
Official Form 207 Statement of Financial Affairs for Non-	Individuals Filing for Bankruptcy		page 1

Page 20 of 30 ase number (if known)

	itor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply	
3.1.	Anthony Pasculli 712 Jefferson Avenue Cliffside Park, NJ 07010	August, Sept and Oct.	\$20,000.00	<ul> <li>Secured debt</li> <li>Unsecured loan repayments</li> <li>Suppliers or vendors</li> <li>Services</li> <li>Other <u>Rental Payments</u></li> </ul>	
Payments or other transfers of property made within 1 year before filing this case that benefited any insider List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. <i>Insiders</i> include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).					
No	ne.				
	er's name and address ionship to debtor	Dates	Total amount of value	Reasons for payment or transfer	

### 5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

	None
--	------

		-	
Creditor's name and address	Describe of the Property	Date	Value of property

#### 6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

	Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Par	t 3: Legal Actions or Assignments			

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity-within 1 year before filing this case.

	Nor	None.					
		Case title Case number	Nature of case	Court or agency's name and address	Status of case		
8.	<ul> <li>Assignments and receivership         List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.     <li>None</li> </li></ul>						
Pa	art 4:	Certain Gifts and Charitable Contribu	itions				
9.	List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000						
	Nor	ne					

#### Document Debtor Doggy Care of Hoboken, LLC.

R	ecipient's name and address	Description of the gifts or contributions	Dates given	Value
Part 5: Ce	ertain Losses			
10. All losses	s from fire, theft, or other casualty v	vithin 1 year before filing this case.		
None				
	ation of the property lost and loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B ( <i>Schedule</i> <i>A/B: Assets – Real and Personal Property</i> ).	Dates of loss	Value of property lost
Part 6: Ce	ertain Payments or Transfers			
List any pa of this cas		of property made by the debtor or person acting on beh g attorneys, that the debtor consulted about debt cons		
□ None.				
1	Who was paid or who received	If not money, describe any property transferred	d Dates	Total amount or

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Stephen & Maria Anatro 207 The Promonade Edgewater, NJ 07020		10/18 /2017	\$1,717.00

Email or website address

Who made the payment, if not debtor?

## 12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
2 years before the filing of this case to anothe	hent by sale, trade, or any other means made by the debtor er person, other than property transferred in the ordinar s security. Do not include gifts or transfers previously lis	y course of business or f	
Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value

#### 14. Previous addresses

None.

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Does not apply			5.4.4	
Address			Dates of occup From-To	pancy
Part 8: Health Care Bankruptcies				
<ol> <li>Health Care bankruptcies</li> <li>Is the debtor primarily engaged in offering servi - diagnosing or treating injury, deformity, or dise - providing any surgical, psychiatric, drug treatr</li> </ol>	ease, or			
No. Go to Part 9.				
Yes. Fill in the information below.				
Facility name and address	Nature of the busines the debtor provides	s operation, including t		If debtor provides meals and housing, number of patients in debtor's care
Part 9: Personally Identifiable Information				
6. Does the debtor collect and retain personal	lv identifiable informatio	n of customers?		
<ul> <li>No.</li> <li>Yes. State the nature of the information of Yes. State the nature of the information of Yes. State the nature of the information of Yes. No. Go to Part 10.</li> <li>Yes. Does the debtor serve as plan admited the debtor serve as plan admited the debtor serve as plan admited to Yes. Does the debtor serve as pla</li></ul>	any employees of the de abtor as an employee be inistrator? posit Boxes, and Storage inancial accounts or instru ther financial accounts; ce	e Units	's name, or for the debt	or's benefit, closed, sold, unions, brokerage houses,
Address	account number	instrument	closed, sold, moved, or transferred	before closing o transfe
<ol> <li>Safe deposit boxes         List any safe deposit box or other depository fo case.     </li> </ol>	r securities, cash, or othe	r valuables the debtor no	w has or did have withir	n 1 year before filing this
■ None				
Depository institution name and address	Names of anyone access to it Address	e with Descri	ption of the contents	Do you still have it?
20. Off-premises storage List any property kept in storage units or wareh which the debtor does business.	ouses within 1 year before	e filing this case. Do not i	nclude facilities that are	in a part of a building in

	None			
	Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Pa	rt 11: Property the Debtor Holds or Controls	s That the Debtor Does Not Own		
I	Property held for another List any property that the debtor holds or controls not list leased or rented property.	s that another entity owns. Include any p	roperty borrowed from, being stored for,	or held in trust. Do
	None			
Pa	rt 12: Details About Environment Informatio	n		
For	the purpose of Part 12, the following definitions a <i>Environmental law</i> means any statute or govern medium affected (air, land, water, or any other	nmental regulation that concerns pollutio	n, contamination, or hazardous material	, regardless of the
	Site means any location, facility, or property, in owned, operated, or utilized.	cluding disposal sites, that the debtor no	w owns, operates, or utilizes or that the	debtor formerly
	Hazardous material means anything that an en similarly harmful substance.	vironmental law defines as hazardous or	toxic, or describes as a pollutant, conta	minant, or a
Rep	ort all notices, releases, and proceedings kn	own, regardless of when they occurre	d.	
22.	Has the debtor been a party in any judicial o	or administrative proceeding under an	y environmental law? Include settlem	ents and orders.
	<ul><li>No.</li><li>Yes. Provide details below.</li></ul>			
	Case title Case number	Court or agency name and address	Nature of the case	Status of case
	Has any governmental unit otherwise notified environmental law?	d the debtor that the debtor may be lia	ble or potentially liable under or in vi	olation of an
	<ul><li>No.</li><li>Yes. Provide details below.</li></ul>			
	Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
24.	Has the debtor notified any governmental un	it of any release of hazardous materia	1?	
	<ul><li>No.</li><li>Yes. Provide details below.</li></ul>			
	Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Pa	rt 13: Details About the Debtor's Business of	or Connections to Any Business		
l	Other businesses in which the debtor has or List any business for which the debtor was an ov Include this information even if already listed in t	wner, partner, member, or otherwise a pe	rson in control within 6 years before filir	ng this case.
	None			
E	Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number	
			Dates business existed	

Official Form 207

Case number (if known)

#### 26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

Name and address	Date of service From-To
26a.1. Stephen Anatro 207 The Promonade Edgewater, NJ 07020	November 2013 to October 2017

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

#### None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

■ None						
Name and address				If any books of account and records are unavailable, explain why		
26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.						
■ None						
Name and address						
27. Inventories Have any inventories of the debtor's p	property been taken within 2 years bef	ore filing this c	case?			
<ul><li>No</li><li>Yes. Give the details about the</li></ul>	two most recent inventories.					
Name of the person who su inventory	pervised the taking of the	Date of invo		lar amount and bas basis) of each inve	• • •	
28. List the debtor's officers, directors in control of the debtor at the time		iers, member	s in control, contro	olling shareholders	s, or other people	
Name	Address		Position and natu	ire of any	% of interest, if any	
Stephen Anatro	207 The Promonade Edgewater, NJ 07020		Managing Mem	ber	50%	

Name	Address	Position and nature of any interest	% of interest, if any
Jude Konzellman	1 Elkins Court Princeton Junction, NJ 08550	Managing Member	50%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Page 25 of 30 ase number (if known)

Name Address Position and nature of any Period during which position or interest interest was held Nirav Patel 800 Jackson Street, PH2 November 2013 to Managing Member - 50% Hoboken, NJ 07030 January 2017

#### 30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No Yes. Identify below. Amount of money or description and value of Dates Reason for Name and address of recipient providing the value property November 30.1 Stephen & Maria Anatro 2016 through 207 The Promonade November Edgewater, NJ 07020 \$33,800.00 Salary 2017 Relationship to debtor Managing Member 31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes? No Yes. Identify below. Name of the parent corporation Employer Identification number of the parent corporation 32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

Yes. Identify below. Name of the parent corporation

No

## Part 14: Signature and Declaration

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.

I have examined the information in this Statement of Financial Affairs and any attachments 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 13, 2017

/s/	Ste	phen	Anatro
-----	-----	------	--------

Stephen Anatro

Printed name Signature of individual signing on behalf of the debtor

Position or relationship to debtor Managing Member

## Are additional pages to Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207) attached?

No

□ Yes

Employer Identification number of the parent

corporation

Case 17-32926-SLM

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court District of New Jersey

In re	Doggy Care of Hoboken, LLC.	Case No	).	
	Debtor(s)	Chapter	11	
	DISCLOSURE OF COMPENSATION OF AT			
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in bankrube rendered on behalf of the debtor(s) in contemplation of or in connection with the	ptcy, or agreed to be pa	id to me, for servi	nd that ices rendered or to
	For legal services, I have agreed to accept	\$	0.00	-
	Prior to the filing of this statement I have received	\$	0.00	-
	Balance Due	\$	0.00	-
2.	The source of the compensation paid to me was:			
	Debtor Other (specify): Stephen Anatro			
3. 7	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 particular the share the above-disclosed compensation with any other particular the share the shar	erson unless they are me	mbers and associate	ates of my law firm.
	□ I have agreed to share the above-disclosed compensation with a person or person copy of the agreement, together with a list of the names of the people sharing a			f my law firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all a	spects of the bankruptc	y case, including:	
1	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor i</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan v</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation heari</li> <li>d. [Other provisions as needed]</li> </ul>	which may be required;	-	n bankruptcy;
,	Negotiations with secured creditors to reduce to market value reaffirmation agreements and applications as needed; prepara 522(f)(2)(A) for avoidance of liens on household goods.			
	* Proposed counsel for Debtor is retained on an hourly basis. proposed counsel has been authorized by the Bankruptcy Co - Partners: \$425 per hour - Associates: \$375 per hour - Paralegals: \$150 per hour		e after applicati	on to retain
<b>6.</b> ]	By agreement with the debtor(s), the above-disclosed fee does not include the follo <b>Representation of the debtors in any dischargeability actions.</b>			
	CERTIFICATION			]
	I certify that the foregoing is a complete statement of any agreement or arrangeme ankruptcy proceeding.	nt for payment to me fo	r representation of	f the debtor(s) in

November 13, 2017	/s/ David L. Stevens
Date	David L. Stevens
	Signature of Attorney
	Scura, Wigfield, Heyer, Stevens & Cammarota, LLP
	1599 Hamburg Turnpike
	Wayne, NJ 07470
	973-696-8391
	ecfbkfilings@scuramealey.com
	Name of law firm

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**United States Bankruptcy Court** 

Debtor(s)

**District of New Jersey** 

In re Doggy Care of Hoboken, LLC.

Case No. \_

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
Jude Konzelmann 1 Elkins Court Princeton Junction, NJ 08550	Ownership	50%	Managing Member
Stephen Anatro 207 The Promonade Edgewater, NJ 07020	Ownership	50%	Managing Member

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

I, the **Managing Member** 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 13, 2017

Signature /s/ Stephen Anatro

Stephen Anatro

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 District of New Jersey

In re	Doggy Care of Hoboken, LLC.		Case No.	
		Debtor(s)	Chapter	11

# **VERIFICATION OF CREDITOR MATRIX**

I, the Managing Member 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: November 13, 2017

/s/ Stephen Anatro Stephen Anatro/Managing Member Signer/Title

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Anthony Pasculli 712 Jefferson Avenue Cliffside Park, NJ 07010

Bank of New Jersey 1365 Palisade Ave. Fort Lee, NJ 07024

Jude Konzelmann 1 Elkins Court Princeton Junction, NJ 08550

M2 Leasing 175 North Patrick Blvd., Suite 140 Brookfield, WI 53045

Maselli Warren, P.C. 600 Alexander Road, Suite 3-4A Attn. David Fornal Princeton, NJ 08540

Nirav Patel 800 Jackson Street, PH2 Hoboken, NJ 07030

State of New Jersey Division of Employer Accounts P.O. Box 379 Trenton, NJ 08625-0379

State of New Jersey Division of Taxation Compliance & Enforcement - Compliance 50 Barrack Street, 9th Floor Trenton, NJ 08695

Stephen & Maria Anatro 207 The Promonade Edgewater, NJ 07020

Tiger Leasing 33 West 19th Street, Floor 4 New York, NY 10011

# United States Bankruptcy Court District of New Jersey

In re **Doggy Care of Hoboken, LLC.** 

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 <u>Doggy Care of Hoboken, LLC.</u> 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:

Jude Konzelmann 1 Elkins Court	
Princeton Junction, NJ 08550	
Stephen Anatro	
207 The Promonade	
Edgewater, NJ 07020	

□ None [*Check if applicable*]

November 13, 2017

Date

/s/ David L. Stevens David L. Stevens Signature of Attorney or Litigant Counsel for Doggy Care of Hoboken, LLC. Scura, Wigfield, Heyer, Stevens & Cammarota, LLP 1599 Hamburg Turnpike Wayne, NJ 07470 973-696-8391 ecfbkfilings@scuramealey.com