

Fill in this information to identify the case:

United States Bankruptcy Court for the:

District of _____

(State)

Case number (if known): _____ Chapter _____

CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF
NEW YORK

2016 JUN -6 A 10:41

☐ Check if this is an
amended filing

RECEIVED

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

EC ABATEMENT INC

2. All other names debtor used
in the last 8 years

LEVENTIS OMOTADJE

Include any assumed names,
trade names, and *doing business*
as names3. Debtor's federal Employer
Identification Number (EIN)

45-3703983

4. Debtor's address

Principal place of business

231-01 Linden Blvd
Number StreetMailing address, if different from principal place
of business2249 Parkhurst Rd
Number StreetCAMBRIA Heights NY 11411
City State ZIP Code

11411

USA
County

P.O. Box

Elmont NY 11003
City State ZIP CodeLocation 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

EC ABATEMENT INC
Name

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

If more than 2 cases, attach a separate list.

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 _____
MM / DD / YYYY

Case number, if known _____

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

Debtor

Name

EC Abatement INC

Case number (if known)

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.

14. Estimated number of creditors☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5,001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated assets**☐ \$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

Debtor

Name

Case number (if known)

16. 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, 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

06/06/16
MM / DD / YYYY

X

Signature of authorized representative of debtor

LEVENTIS OMOTADE

Printed name

Title

LEVENTIS OMOTADE
President

18. Signature of attorney

X

Signature of attorney for debtor

Date

MM / DD / YYYY

Printed name

Firm name

Number Street

City

State

ZIP Code

Contact phone

Email address

Bar number

State

Fill in this information to identify your case:

Debtor 1
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number
 (If known)

☐ Check if this is an amended filing

Official Form 103A

Application for Individuals to Pay the Filing Fee in Installments

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: Specify Your Proposed Payment Timetable

1. Which chapter of the Bankruptcy Code are you choosing to file under?

- ☐ Chapter 7
☒ Chapter 11
☐ Chapter 12
☐ Chapter 13

2. You may apply to pay the filing fee in up to four installments. Fill in the amounts you propose to pay and the dates you plan to pay them. Be sure all dates are business days. Then add the payments you propose to pay.

You must propose to pay the entire fee no later than 120 days after you file this bankruptcy case. If the court approves your application, the court will set your final payment timetable.

You propose to pay...

\$ 250

☐ With the filing of the petition

☐ On or before this date..... MM / DD / YYYY

06 / 06 / 2016

\$ 500

On or before this date..... MM / DD / YYYY

07 / 06 / 2016

\$ 500

On or before this date..... MM / DD / YYYY

08 / 05 / 2016

+ \$ 467

On or before this date..... MM / DD / YYYY

09 / 06 / 2016

Total

\$ 1717

◀ Your total must equal the entire fee for the chapter you checked in line 1.

Part 2: Sign Below

By signing here, you state that you are unable to pay the full filing fee at once, that you want to pay the fee in installments, and that you understand that:

- ☒ You must pay your entire filing fee before you make any more payments or transfer any more property to an attorney, bankruptcy petition preparer, or anyone else for services in connection with your bankruptcy case.
- ☒ You must pay the entire fee no later than 120 days after you first file for bankruptcy, unless the court later extends your deadline. Your debts will not be discharged until your entire fee is paid.
- ☒ If you do not make any payment when it is due, your bankruptcy case may be dismissed, and your rights in other bankruptcy proceedings may be affected.

x
 Signature of Debtor 1

Date
 MM / DD / YYYY

x
 Signature of Debtor 2

Date
 MM / DD / YYYY

x
 Your attorney's name and signature, if you used one

Date
 MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 _____
 First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number _____
 (if known)

☐ Check if this is an
 amended filing

Official Form 104

**For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest
 Unsecured Claims Against You and Are Not Insiders**

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an *insider*. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. 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.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

			Unsecured claim	
1	Golden Choi Creditor's Name 14726 Hillside Ave Number Street Jamaica NY 11435 City State ZIP Code Contact Contact phone	What is the nature of the claim? <u>Rent</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$ 31,000.00	
2	NYSIF Creditor's Name 199 Church Street Number Street New York NY 10007 City State ZIP Code Contact Contact phone	What is the nature of the claim? <u>Insurance</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$ 33,000.00	

Debtor 1

EC Attachment 100

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

3

IRS

Creditor's Name

Number Street

City State ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ 35,000.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

4

Bank of America

Creditor's Name

Number Street

City State ZIP Code

Contact

Contact phone

What is the nature of the claim? Mortgage\$ 450,000.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

5

Creditor's Name

Number Street

City State ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

6

Creditor's Name

Number Street

City State ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

7

Creditor's Name

Number Street

City State ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

8 Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Contact _____ Contact phone _____	What is the nature of the claim? _____ \$ _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____
9 Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Contact _____ Contact phone _____	What is the nature of the claim? _____ \$ _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____
10 Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Contact _____ Contact phone _____	What is the nature of the claim? _____ \$ _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____
11 Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Contact _____ Contact phone _____	What is the nature of the claim? _____ \$ _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____
12 Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Contact _____ Contact phone _____	What is the nature of the claim? _____ \$ _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

13

Creditor's Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact _____

Contact phone _____

What is the nature of the claim? \$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- ☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
- ☐ Yes. Total claim (secured and unsecured): \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

14

Creditor's Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact _____

Contact phone _____

What is the nature of the claim? \$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- ☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
- ☐ Yes. Total claim (secured and unsecured): \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

15

Creditor's Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact _____

Contact phone _____

What is the nature of the claim? \$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- ☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
- ☐ Yes. Total claim (secured and unsecured): \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

16

Creditor's Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact _____

Contact phone _____

What is the nature of the claim? \$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- ☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
- ☐ Yes. Total claim (secured and unsecured): \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

17

Creditor's Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact _____

Contact phone _____

What is the nature of the claim? \$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- ☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
- ☐ Yes. Total claim (secured and unsecured): \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

Debtor 1

First Name

Middle Name

Last Name

Case number (if known)

Unsecured claim

18

Creditor's Name

Number

Street

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

☐ No☐ Yes. Total claim (secured and unsecured): \$ _____

Value of security: - \$ _____

Unsecured claim \$ _____

19

Creditor's Name

Number

Street

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

☐ No☐ Yes. Total claim (secured and unsecured): \$ _____

Value of security: - \$ _____

Unsecured claim \$ _____

20

Creditor's Name

Number

Street

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

☐ No☐ Yes. Total claim (secured and unsecured): \$ _____

Value of security: - \$ _____

Unsecured claim \$ _____

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

x

Signature of Debtor 1

Date

MM / DD / YYYY

x

Signature of Debtor 2

Date

MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK
www.nyeb.uscourts.gov

**STATEMENT PURSUANT TO LOCAL
BANKRUPTCY RULE 1073-2(b)**

DEBTOR(S): EC Abatement INC **CASE NO.:** _____

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:

[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]

☒ **NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.**

☐ **THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:**

1. **CASE NO.:** _____ **JUDGE:** _____ **DISTRICT/DIVISION:** _____

CASE STILL PENDING: (YES/NO): _____ *[If closed]* **Date of closing:** _____

CURRENT STATUS OF RELATED CASE: _____
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): _____

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASES: _____

2. **CASE NO.:** _____ **JUDGE:** _____ **DISTRICT/DIVISION:** _____

CASE STILL PENDING: (YES/NO): _____ *[If closed]* **Date of closing:** _____

CURRENT STATUS OF RELATED CASE: _____
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): _____

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASES: _____

[OVER]

DISCLOSURE OF RELATED CASES (cont'd)

3. CASE NO.: _____ JUDGE: _____ DISTRICT/DIVISION: _____

CASE STILL PENDING: (YES/NO): _____ [If closed] Date of closing: _____

CURRENT STATUS OF RELATED CASE: _____
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): _____

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASES: _____

NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file.

TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE:

I am admitted to practice in the Eastern District of New York (Y/N): _____

CERTIFICATION (to be signed by pro-se debtor/petitioner or debtor/petitioner's attorney, as applicable):

I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form.

Signature of Debtor's Attorney

Signature of Pro-se Debtor/Petitioner

2249 Parkhurst Rd

Mailing Address of Debtor/Petitioner

Elmont NY 11003

City, State, Zip Code

Asbestos202@aol.com

Email Address

718 978 0880

Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

Certificate Number: 01401-NYE-CC-027363921



01401-NYE-CC-027363921

CERTIFICATE OF COUNSELING

I CERTIFY that on April 29, 2016, at 10:01 o'clock AM EDT, Leventis O Omotade received from GreenPath, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of New York, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: April 29, 2016 By: /s/Jeremy Lark for Michael Kennedy

Name: Michael Kennedy

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Golden Choi
c/o Sedation
147-26 Hillside Ave
Jamaica, NY 11435

NYSIF
199 Church Street
New York, NY 10007

IRS

Bank of America