

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NEW YORK

Case number *(if known)* _____ Chapter 11 Check if this an amended filing**Official Form 201****Voluntary Petition for Non-Individuals Filing for Bankruptcy**

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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	<u>H3C, Inc. dba Left Coast Kitchen and Cocktails</u>	
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)	<u>36-4679198</u>	
4.	Debtor's address	Principal place of business	Mailing address, if different from principal place of business
		<u>1810 Merrick Rd.</u> <u>Merrick, NY 11566</u> Number, Street, City, State & ZIP Code	_____ P.O. Box, Number, Street, City, State & ZIP Code
		<u>Nassau</u> County	Location of principal assets, if different from principal place of business _____ Number, Street, City, State & ZIP Code
5.	Debtor's website (URL)	<u>www.lckny.com; www.facebook.com/lckny</u>	
6.	Type of debtor	<input type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input checked="" type="checkbox"/> Other. Specify: <u>S-Corp.</u>	

Debtor H3C, Inc. dba Left Coast Kitchen and Cocktails
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>.

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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.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- No
- Yes.

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

Debtor _____	Relationship _____
District _____	When _____ Case number, if known _____

Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**
Name

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 to unsecured creditors.

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"/> 5001-10,000	<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 checked="" 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 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 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

Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**
Name

Case number (if known)

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 **November 14, 2017**
MM / DD / YYYY

X /s/ Christian Randell
Signature of authorized representative of debtor

Title **President**

Christian Randell
Printed name

18. Signature of attorney

X /s/ Neil Ackerman
Signature of attorney for debtor

Date **November 14, 2017**
MM / DD / YYYY

Neil Ackerman
Printed name

Ackerman Fox, LLP
Firm name

**90 Merrick Ave.
Suite 400
East Meadow, NY 11554**
Number, Street, City, State & ZIP Code

Contact phone **(516) 493-9920** Email address **nackerman@ackermanfox.com**

1805811
Bar number and State

Fill in this information to identify the case:Debtor name H3C, Inc. dba Left Coast Kitchen and CocktailsUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

 Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

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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 **Balance Sheet, Statement of Operations, Cash Flow Statement, 2016 Tax Returns**

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 14, 2017X /s/ Christian Randell

Signature of individual signing on behalf of debtor

Christian Randell

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **H3C, Inc. dba Left Coast Kitchen and Cocktails**
 United States Bankruptcy Court for the: **EASTERN DISTRICT OF NEW YORK**
 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**

12/15

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, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Alessandro & Associates, CPA, PLLC 1 Suffolk Square Suite 520 Islandia, NY 11749		accountant fees	Unliquidated Disputed			\$2,000.00
Arrow Produce 461 Railroad Ave. #1 Westbury, NY 11590		goods	Unliquidated Disputed			\$2,352.00
CAN Capital 414 W. 14th Street New York, NY 10001-4000		point of sale agreement	Unliquidated Disputed			\$44,000.00
Christian Randell 2525 Williams Court Bellmore, NY 11710		capital contribution	Unliquidated Disputed			\$32,500.00
Elite Parking & Hospitali 591 Stewart Ave. # 150 Garden City, NY 11530		parking attendant services	Unliquidated Disputed			\$5,000.00
Grabar Fish 102 Bond Street Westbury, NY 11590		fish producer	Unliquidated Disputed			\$600.00
Hartford Insurance 401 Franklin Ave. Garden City, NY 11530		workers compensation insurance premiums	Unliquidated Disputed			\$2,981.00
Heather Randell 2525 Williams Court Bellmore, NY 11710		capital contribution	Unliquidated Disputed			\$32,500.00
Internal Revenue Service Steven J. Denicola 999 Stewart Ave. Bethpage, NY 11714		IRS 941 and 1120 taxes	Disputed			\$83,053.85

Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**
Name

Case number (if known)

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	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Lieber Bros. 65 Commercial Ave. Garden City, NY 11530		liquor distributor	Unliquidated Disputed			\$495.00
Medowar Properties Corp. 2052 Vine Drive Merrick, NY 11566		Alleged discrepancies in real estate taxes and additional rent due and owing to landlord.	Unliquidated Disputed			\$24,193.90
National Grid 175 E. Old Country Rd. Hicksville, NY 11801		gas services	Unliquidated Disputed			\$1,200.00
New York State Department of Taxation and Finance P.O. Box 4127 Binghamton, NY 13902		withholding and sales tax	Disputed			\$85,792.65
North Shore Linen 129 Hanse Ave. Freeport, NY 11520		linen services	Unliquidated Disputed			\$1,000.00
PSEG Long Island P.O. Box 9083 Melville, NY 11747		electric services	Unliquidated Disputed			\$400.00
Ronnie Milman 63 Waterbury Lane Westbury, NY 11590		accountant fees	Unliquidated Disputed			\$3,200.00
Sysco Long Island, LLC 199 Lowell Ave. Central Port Jefferson, NY 11777		food distributor	Unliquidated Disputed			\$2,216.06
TD Auto Finance P.O.Box 16035 Lewiston, ME 04243		Owned by principal of debtor. Debtor pays monthly finance payment as part of perk.	Unliquidated Disputed			\$1,000.00
Two Cousins 255 Woodcleft Ave. Freeport, NY 11520		fish distributor	Unliquidated Disputed			\$2,600.00
Yellowstone Capital LLC One Evertrust Plaza Suite 1401 Jersey City, NJ 07302		loans - cash advances	Unliquidated Disputed			\$34,000.00

Fill in this information to identify the case:

Debtor name H3C, Inc. dba Left Coast Kitchen and Cocktails

United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

Check if this is an amended filing

**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

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Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>27,389.07</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>27,389.07</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>0.00</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>168,846.50</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>194,897.96</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>363,744.46</u>

Fill in this information to identify the case:

Debtor name H3C, Inc. dba Left Coast Kitchen and Cocktails

United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

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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.
- Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
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3.1. <u>JPMorgan Chase</u>	<u>checking</u>	<u>8201</u>	<u>\$70.88</u>
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3.2. <u>JPMorgan Chase</u>	<u>payroll checking</u>	<u>5939</u>	<u>\$18.18</u>
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3.3. <u>JPMorgan Chase</u>	<u>savings</u>	<u>6109</u>	<u>\$0.01</u>
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4. **Other cash equivalents** (Identify all)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

<u>\$89.07</u>

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
- Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. <u>National Grid</u>		<u>\$1,300.00</u>
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Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**
Name

Case number (If known) _____

7.2. **PSE&G** **\$2,500.00**

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

8.1. **Security deposit to landlord, Medowar Properties Corp.** **\$12,500.00**

9. **Total of Part 2.**
Add lines 7 through 8. Copy the total to line 81.

\$16,300.00

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- No. Go to Part 4.
- Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 5,000.00 - 0.00 = 5,000.00
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**
Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$5,000.00

Part 4: Investments

13. **Does the debtor own any investments?**

- No. Go to Part 5.
- Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- No. Go to Part 6.
- Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- No. Go to Part 7.
- Yes Fill in the information below.

Part 7: 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.

Debtor H3C, Inc. dba Left Coast Kitchen and Cocktails Case number (If known) _____
 Name

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture Tables, chairs, kitchen equipment used in restaurant	Unknown	Liquidation	\$4,000.00
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software Point of sale system, dishwashing machine, coffee machine, computer system	Unknown	Liquidation	\$2,000.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** Add lines 39 through 42. Copy the total to line 86. \$6,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?
 No
 Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?
 No
 Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?
 No. Go to Part 9.
 Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?
 No. Go to Part 10.
 Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?
 No. Go to Part 11.
 Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites www.lckny.com www.facebook.com/lckny	Unknown	Liquidation	Unknown

Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**
Name

Case number (If known) _____

78. **Total of Part 11.**
Add lines 71 through 77. Copy the total to line 90.

<u>\$0.00</u>

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**
 No
 Yes

Debtor H3C, Inc. dba Left Coast Kitchen and Cocktails
Name

Case number (If known) _____

Part 12: Summary

In Part 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. <i>Copy line 5, Part 1</i>	<u>\$89.07</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$16,300.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$5,000.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$6,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$27,389.07</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$27,389.07</u>

Fill in this information to identify the case:

Debtor name H3C, Inc. dba Left Coast Kitchen and Cocktails

United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

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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.

Fill in this information to identify the case:

Debtor name H3C, Inc. dba Left Coast Kitchen and Cocktails

United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

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 in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Internal Revenue Service Department of Treasury P.O. Box 9038 Andover, MA 01810	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred 2017	Basis for the claim: _____		
	Last 4 digits of account number 7996 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Internal Revenue Service Steven J. Denicola 999 Stewart Ave. Bethpage, NY 11714	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$83,053.85	\$83,053.85
	Date or dates debt was incurred 2014, 2015, 2016	Basis for the claim: IRS 941 and 1120 taxes		
	Last 4 digits of account number 9198 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	H3C, Inc. dba Left Coast Kitchen and Cocktails <small>Name</small>	Case number (if known)	
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2.3	Priority creditor's name and mailing address New York State Department of Taxation and Finance P.O. Box 4127 Binghamton, NY 13902	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$85,792.65	\$85,792.65
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Date or dates debt was incurred 2015, 2016, 2017	Basis for the claim: withholding and sales tax
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Last 4 digits of account number 0411	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.4	Priority creditor's name and mailing address New York State Dept. of Taxation & Finance Bankruptcy Section P.O. Box 5300 Albany, NY 12205	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$0.00	\$0.00
-----	---	---	---------------	---------------

Date or dates debt was incurred 2017	Basis for the claim:
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Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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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.

3.1	Nonpriority creditor's name and mailing address Alessandro & Associates, CPA, PLLC 1 Suffolk Square Suite 520 Islandia, NY 11749	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$2,000.00
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Date(s) debt was incurred 2016, 2017	Basis for the claim: accountant fees
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Last 4 digits of account number _	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.2	Nonpriority creditor's name and mailing address All Island 2766 Merrick Rd. Bellmore, NY 11710	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$300.00
-----	--	---	-----------------

Date(s) debt was incurred 2017	Basis for the claim: beer distributor
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Last 4 digits of account number _	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.3	Nonpriority creditor's name and mailing address American Express Bank, FSB 4315 South 2700 West Salt Lake City, UT 84184	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$0.00
-----	--	---	---------------

Date(s) debt was incurred _	Basis for the claim: Claim was satisfied in full.
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Last 4 digits of account number _	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Name	Case number (if known)	
	H3C, Inc. dba Left Coast Kitchen and Cocktails		
3.4	Nonpriority creditor's name and mailing address Arrow Produce 461 Railroad Ave. #1 Westbury, NY 11590 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>goods</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,352.00
3.5	Nonpriority creditor's name and mailing address ASCAP 1900 Broadway New York, NY 10023 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>music licensing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.6	Nonpriority creditor's name and mailing address BMI 10 Music Square East Nashville, TN 37203 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>music licensing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.7	Nonpriority creditor's name and mailing address CAN Capital 414 W. 14th Street New York, NY 10001-4000 Date(s) debt was incurred <u>3/28/16</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>point of sale agreement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$44,000.00
3.8	Nonpriority creditor's name and mailing address Christian Randell 2525 Williams Court Bellmore, NY 11710 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>capital contribution</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,500.00
3.9	Nonpriority creditor's name and mailing address Corporate Service Co. P.O. Box 2576 Springfield, IL 62708 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>3659</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>DISPUTED. Satisfied already.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.10	Nonpriority creditor's name and mailing address Cynergy Data Co. Merchant Services P.O. Box 246 Alpharetta, GA 30009 Date(s) debt was incurred <u>2016, 2017</u> Last 4 digits of account number <u>0716</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>NYS unemployment insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	H3C, Inc. dba Left Coast Kitchen and Cocktails Name	Case number (if known)	
3.11	Nonpriority creditor's name and mailing address Ecolab/Pure Force 370 N. Wabasha Street Saint Paul, MN 55121 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>lease for dishwashing machine</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$180.00
3.12	Nonpriority creditor's name and mailing address Elite Parking & Hospitali 591 Stewart Ave. # 150 Garden City, NY 11530 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u>3150</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>parking attendant services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,000.00
3.13	Nonpriority creditor's name and mailing address Grabar Fish 102 Bond Street Westbury, NY 11590 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>fish producer</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.14	Nonpriority creditor's name and mailing address Guardian Insurance 6255 Sterners Way Bethlehem, PA 18017 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>disability insurance premiums</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
3.15	Nonpriority creditor's name and mailing address Hartford Insurance 401 Franklin Ave. Garden City, NY 11530 Date(s) debt was incurred <u>2016 audit and 10/17, 9/17</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>workers compensation insurance premiums</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,981.00
3.16	Nonpriority creditor's name and mailing address Heather Randell 2525 Williams Court Bellmore, NY 11710 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>capital contribution</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,500.00
3.17	Nonpriority creditor's name and mailing address Jamaica Ash 172 School Street Westbury, NY 11590 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>garbage services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00

Debtor H3C, Inc. dba Left Coast Kitchen and Cocktails		Case number (if known) _____
Name _____		
3.18	Nonpriority creditor's name and mailing address JPMorgan Chase Court Orders and Levies Dept. P.O. Box 183164 Columbus, OH 43218 Date(s) debt was incurred <u>2016, 2017</u> Last 4 digits of account number <u>0716</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>NYS unemployment insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.19	Nonpriority creditor's name and mailing address Lieber Bros. 65 Commercial Ave. Garden City, NY 11530 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>liquor distributor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$495.00
3.20	Nonpriority creditor's name and mailing address Living Social Inc. 1445 New York Ave. NW Washington, DC 20005 Date(s) debt was incurred <u>2016, 2017</u> Last 4 digits of account number <u>0716</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>NYS unemployment insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.21	Nonpriority creditor's name and mailing address Medowar Properties Corp. 2052 Vine Drive Merrick, NY 11566 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Alleged discrepancies in real estate taxes and additional rent due and owing to landlord.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$24,193.90
3.22	Nonpriority creditor's name and mailing address Medowar Property Manager 11602 Briarwood Circle Apt. 1 Boynton Beach, FL 33437 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u>ckRd</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY. Manager for restaurant premises</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.23	Nonpriority creditor's name and mailing address National Grid 175 E. Old Country Rd. Hicksville, NY 11801 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>gas services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$1,200.00
3.24	Nonpriority creditor's name and mailing address New York American Water 60 Brooklyn Ave. Locust Valley, NY 11560 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>water services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$300.00

Debtor	Name	Case number (if known)
	H3C, Inc. dba Left Coast Kitchen and Cocktails	
3.25	Nonpriority creditor's name and mailing address New York State Unemployment Insurance P.O. Box 4305 Binghamton, NY 13902 Date(s) debt was incurred <u>2015, 2017</u> Last 4 digits of account number <u>6071</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>unemployment insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$0.00
3.26	Nonpriority creditor's name and mailing address North Shore Linen 129 Hanse Ave. Freeport, NY 11520 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>linen services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,000.00
3.27	Nonpriority creditor's name and mailing address NYC Creative Associates Inc. 8 Bay Front Drive Baldwin, NY 11510 Date(s) debt was incurred <u>2010</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Claim was satisfied in full.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$0.00
3.28	Nonpriority creditor's name and mailing address Premium Assignment 3522 Thomasville Rd., Suite 400 Tallahassee, FL 32309 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>general liability insurance premiums</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$300.00
3.29	Nonpriority creditor's name and mailing address Principis Capital LLC P.O. Box 3310 New York, NY 10001 Date(s) debt was incurred <u>2012</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Claim was satisfied in full.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$0.00
3.30	Nonpriority creditor's name and mailing address PSEG Long Island P.O. Box 9083 Melville, NY 11747 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>electric services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$400.00
3.31	Nonpriority creditor's name and mailing address Ronnie Milman 63 Waterbury Lane Westbury, NY 11590 Date(s) debt was incurred <u>2014</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>accountant fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$3,200.00

Debtor	H3C, Inc. dba Left Coast Kitchen and Cocktails Name	Case number (if known)	
3.32	Nonpriority creditor's name and mailing address S. Robert Kroll, Esq. 25 Merrick Ave., 2nd Fl. Merrick, NY 11566 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>ckRd,prem</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY.</u> <u>Attorneys for landlord, Medowar Properties Corp.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.33	Nonpriority creditor's name and mailing address Sarene Craft Beer Distributors LLC 3301 Merritt Ave. Bronx, NY 10475 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Beer distributor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00
3.34	Nonpriority creditor's name and mailing address SID 160 Corp. 25 Deerwood Dr. Buffalo, NY 14221 Date(s) debt was incurred <u>2012</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Claim was satisfied in full.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.35	Nonpriority creditor's name and mailing address Sysco Long Island, LLC 199 Lowell Ave. Central Port Jefferson, NY 11777 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>food distributor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,216.00
3.36	Nonpriority creditor's name and mailing address TD Auto Finance P.O.Box 16035 Lewiston, ME 04243 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Owned by principal of debtor. Debtor pays monthly finance payment as part of perk.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.37	Nonpriority creditor's name and mailing address Two Cousins 255 Woodcleft Ave. Freeport, NY 11520 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>fish distributor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,600.00
3.38	Nonpriority creditor's name and mailing address Verizon P.O. Box 15124 Albany, NY 12212 Date(s) debt was incurred <u>2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>telephone services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$380.00

Debtor H3C, Inc. dba Left Coast Kitchen and Cocktails Case number (if known) _____
Name

3.39 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$200.00
Wheatfield Distributors
109 Danbury Rd.
Ridgefield, CT 06877
 Date(s) debt was incurred 2017
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: bread distributor
 Is the claim subject to offset? No Yes

3.40 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$34,000.00
Yellowstone Capital LLC
One Evertrust Plaza
Suite 1401
Jersey City, NJ 07302
 Date(s) debt was incurred 5/29/2017
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: loans - cash advances
 Is the claim subject to offset? No Yes

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

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.	\$ <u>168,846.50</u>
5b.	+ \$ <u>194,897.96</u>
5c.	\$ <u>363,744.46</u>

Fill in this information to identify the case:Debtor name H3C, Inc. dba Left Coast Kitchen and CocktailsUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

 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, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases? 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 leases****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

Commercial lease for space to operate of bar/grill/restaurant purposes commencing January 1, 2011 through and including December 31, 2020, with options to renew. 3 yrs. 1 month

State the term remaining

List the contract number of any government contract _____

**Medowar Properties Corp.
2052 Vine Drive
Merrick, NY 11566**

2.2. State what the contract or lease is for and the nature of the debtor's interest

Lease agreement for dishwashing machine with average monthly payments of \$180.

State the term remaining

List the contract number of any government contract _____

**Pure Force
P.O. Box 32027
New York, NY 10087**

2.3. State what the contract or lease is for and the nature of the debtor's interest

Point of Sale agreement dated April 1, 2017 for a period of 48 months with 10 renewable months. 40 months

State the term remaining

List the contract number of any government contract _____

**Super PC Systems, Inc.
78 Bay 50th Street, 1st F
Brooklyn, NY 11214**

Fill in this information to identify the case:

Debtor name H3C, Inc. dba Left Coast Kitchen and Cocktails

United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

Check if this is an amended filing

**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	_____	Street _____ _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	_____	Street _____ _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	_____	Street _____ _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____	Street _____ _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name H3C, Inc. dba Left Coast Kitchen and Cocktails

United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. 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).

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:
From 1/01/2017 to **Filing Date**

Operating a business
 Other _____

\$1,144,345.52

For prior year:
From 1/01/2016 to 12/31/2016

Operating a business
 Other _____

\$1,406,734.00

For year before that:
From 1/01/2015 to 12/31/2015

Operating a business
 Other _____

\$1,473,159.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

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 this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor 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.)

None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. New York State Unemployment Insurance P.O. Box 4305 Binghamton, NY 13902	9/27/17	\$11,495.32	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>unemployment insurance - levied against bank account</u>
3.2. New York State Department of Labor Unemployment Insurance Division State Office Campus, B-12Rm 256 Albany, NY 12240	11/6/17	\$8,765.95	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>unemployment insurance - levied against bank account</u>
3.3. Department of Treasury Internal Revenue Service P.O. Box 480 Holtsville, NY 11742	9/27/17	\$5,090.56	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>taxes - levied against bank account</u>

4. 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. *Insiders* 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).

None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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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
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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
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Part 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.

Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**

Case number (if known) _____

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. The People of the State of NY v. HC3 Inc and Daniel Igneri 355066	Code violation - failure to maintain book and decods on premises (SOA enforcement for non-compliance with sign)	Police Dept. County of Nassau	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. 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.

None

Part 4: Certain Gifts and Charitable Contributions

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

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	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 (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
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Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**

Case number (if known) _____

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Ackerman Fox LLP 90 Merrick Ave. Suite 400 East Meadow, NY 11554	\$21,717.00 (\$20,000 retainer plus \$1,717 filing fee)	11/10/17 \$2,500 - Heather Randell 11/13/17 - \$15,000 - Linda and Richard Randell 11/13/17 - \$4,235 - HC3, Inc.	\$21,717.00
Email or website address www.ackermanfox.com			

Who made the payment, if not debtor?
Heather Randell, Linda and Richard Randell

11.2. EisnerAmper 750 Third Ave. New York, NY 10017	\$2,500 for bankruptcy accounting services	11/13/17	\$2,500.00
Email or website address www.eisneramper.com			

Who made the payment, if not debtor?
Christian Randell, principal of 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.

None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations

14. Previous addresses

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

Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**

Case number (if known) _____

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
 - diagnosing or treating injury, deformity, or disease, or
 - providing any surgical, psychiatric, drug treatment, or obstetric care?

- No. Go to Part 9.
- Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- No.
- Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- No. Go to Part 10.
- Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?
 Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**

Case number (if known) _____

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Extra Space Storage 80 Mill Rd. Freeport, NY 11520	Christian Randell and Heather Randell 2525 Williams Ct. Bellmore, NY 11710	decorative materials, business records	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No.
 Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No.
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

No.
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Debtor **H3C, Inc. dba Left Coast Kitchen and Cocktails**

Case number (if known) _____

Business name address**Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

Dates business existed**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.

 None**Name and address****Date of service
From-To**

26a.1. **Alessandro & Associates, CPA, PLLC**
Guy T. Alessandro, CPA
1 Suffolk Square, Ste 520
Islandia, NY 11749

2014, 2015, 2016,
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 property been taken within 2 years before filing this case?

 No Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the
inventory****Date of inventory****The dollar amount and basis (cost, market,
or other basis) of each inventory****28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

Name	Address	Position and nature of any interest	% of interest, if any
Christian Randell	2525 Williams Court Bellmore, NY 11710	President	50%
Heather Randell	2525 Williams Court Bellmore, NY 11710	Vice President	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.

Debtor H3C, Inc. dba Left Coast Kitchen and Cocktails

Case number (if known) _____

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.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Christian Randell 2525 Williams Court Bellmore, NY 11710	\$106,437.41	November 14, 2016 through November 14, 2017	Distribution to principals
	Relationship to debtor Principals of the debtor			

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?

- No
 Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation

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 14, 2017

/s/ Christian Randell
Signature of individual signing on behalf of the debtor

Christian Randell
Printed name

Position or relationship to debtor President

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

- No
 Yes

**United States Bankruptcy Court
Eastern District of New York**

In re H3C, Inc. dba Left Coast Kitchen and Cocktails

Debtor(s)

Case No. _____

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Christian Randell 2525 Williams Court Bellmore, NY 11710			common stock
Heather Randell 2525 Williams Court Bellmore, NY 11710			common stock

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **President** of the S-Corp. 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 14, 2017Signature /s/ Christian Randell
Christian Randell

*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
Eastern District of New York**

In re **H3C, Inc. dba Left Coast Kitchen and Cocktails** Debtor(s) Case No. _____
Chapter **11**

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: **November 14, 2017**

/s/ Christian Randell
Christian Randell/President
Signer/Title

Date: **November 14, 2017**

/s/ Neil Ackerman
Signature of Attorney
Neil Ackerman
Ackerman Fox, LLP
90 Merrick Ave.
Suite 400
East Meadow, NY 11554
(516) 493-9920 Fax: (516) 228-3396

Alessandro & Associates,
CPA, PLLC
1 Suffolk Square
Suite 520
Islandia, NY 11749

All Island
2766 Merrick Rd.
Bellmore, NY 11710

American Express Bank,
FSB
4315 South 2700 West
Salt Lake City, UT 84184

Arrow Produce
461 Railroad Ave. #1
Westbury, NY 11590

ASCAP
1900 Broadway
New York, NY 10023

BMI
10 Music Square East
Nashville, TN 37203

CAN Capital
414 W. 14th Street
New York, NY 10001-4000

Christian Randell
2525 Williams Court
Bellmore, NY 11710

Corporate Service Co.
P.O. Box 2576
Springfield, IL 62708

Cynergy Data Co. Merchant
Services
P.O. Box 246
Alpharetta, GA 30009

Ecolab/Pure Force
370 N. Wabasha Street
Saint Paul, MN 55121

Elite Parking & Hospitali
591 Stewart Ave. # 150
Garden City, NY 11530

Grabar Fish
102 Bond Street
Westbury, NY 11590

Guardian Insurance
6255 Sterners Way
Bethlehem, PA 18017

Hartford Insurance
401 Franklin Ave.
Garden City, NY 11530

Heather Randell
2525 Williams Court
Bellmore, NY 11710

Internal Revenue Service
Department of Treasury
P.O. Box 9038
Andover, MA 01810

Internal Revenue Service
Steven J. Denicola
999 Stewart Ave.
Bethpage, NY 11714

Jamaica Ash
172 School Street
Westbury, NY 11590

JPMorgan Chase
Court Orders and Levies
Dept.
P.O. Box 183164
Columbus, OH 43218

Lieber Bros.
65 Commercial Ave.
Garden City, NY 11530

Living Social Inc.
1445 New York Ave. NW
Washington, DC 20005

Medowar Properties Corp.
2052 Vine Drive
Merrick, NY 11566

Medowar Property Manager
11602 Briarwood Circle
Apt. 1
Boynton Beach, FL 33437

National Grid
175 E. Old Country Rd.
Hicksville, NY 11801

New York American Water
60 Brooklyn Ave.
Locust Valley, NY 11560

New York State
Unemployment Insurance
P.O. Box 4305
Binghamton, NY 13902

New York State Department
of Taxation and Finance
P.O. Box 4127
Binghamton, NY 13902

New York State Dept.
of Taxation & Finance
Bankruptcy Section
P.O. Box 5300
Albany, NY 12205

North Shore Linen
129 Hanse Ave.
Freeport, NY 11520

NYC Creative Associates
Inc.
8 Bay Front Drive
Baldwin, NY 11510

Premium Assignment
3522 Thomasville Rd.,
Suite 400
Tallahassee, FL 32309

Principis Capital LLC
P.O. Box 3310
New York, NY 10001

PSEG Long Island
P.O. Box 9083
Melville, NY 11747

Pure Force
P.O. Box 32027
New York, NY 10087

Ronnie Milman
63 Waterbury Lane
Westbury, NY 11590

S. Robert Kroll, Esq.
25 Merrick Ave., 2nd Fl.
Merrick, NY 11566

Sarene Craft Beer
Distributors LLC
3301 Merritt Ave.
Bronx, NY 10475

SID 160 Corp.
25 Deerwood Dr.
Buffalo, NY 14221

Super PC Systems, Inc.
78 Bay 50th Street, 1st F
Brooklyn, NY 11214

Sysco Long Island, LLC
199 Lowell Ave. Central
Port Jefferson, NY 11777

TD Auto Finance
P.O.Box 16035
Lewiston, ME 04243

Two Cousins
255 Woodcleft Ave.
Freeport, NY 11520

Verizon
P.O. Box 15124
Albany, NY 12212

Wheatfield Distributors
109 Danbury Rd.
Ridgefield, CT 06877

Yellowstone Capital LLC
One Evertrust Plaza
Suite 1401
Jersey City, NJ 07302

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK**

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

DEBTOR(S): H3C, Inc. dba Left Coast Kitchen and Cocktails **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 (Y/N): _____ [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 CASE: _____

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

CASE STILL PENDING (Y/N): _____ [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 CASE: _____

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

CASE STILL PENDING (Y/N): _____ [If closed] Date of closing: _____

(OVER)

DISCLOSURE OF RELATED CASES (cont'd)

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 CASE: _____

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): Y

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.

/s/ Neil Ackerman
Neil Ackerman
Signature of Debtor's Attorney
Ackerman Fox, LLP
90 Merrick Ave.
Suite 400
East Meadow, NY 11554
(516) 493-9920 Fax:(516) 228-3396

Signature of Pro Se Debtor/Petitioner

Signature of Pro Se Joint Debtor/Petitioner

Mailing Address of Debtor/Petitioner

City, State, Zip Code

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.