

B5 (Official Form 5) (12/07)

FORM 5. INVOLUNTARY PETITION

<b>United States Bankruptcy Court</b>		<b>INVOLUNTARY PETITION</b>	
<b>Eastern District of New York</b>			
IN RE (Name of Debtor - If Individual: Last, First, Middle)  1663 60th Street, LLC		ALL OTHER NAMES used by debtor in the last 8 years (Include married, maiden, and trade names.)	
Last four digits of Social-Security or other Individual's Tax-ID No./Complete EIN (If more than one, state all.) 27-0551497			
STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code)  1663 60th Street Brooklyn, NY 11214		MAILING ADDRESS OF DEBTOR (If different from street address)	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS  Kings</td> </tr> </table>		COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS  Kings	
COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS  Kings			
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from previously listed addresses)			
CHAPTER OF BANKRUPTCY CODE UNDER WHICH PETITION IS FILED  <input type="checkbox"/> Chapter 7 <input checked="" type="checkbox"/> Chapter 11			
<b>INFORMATION REGARDING DEBTOR (Check applicable boxes)</b>			
<b>Nature of Debts</b> (Check one box)  Petitioners believe: <input type="checkbox"/> Debts are primarily consumer debts <input checked="" type="checkbox"/> Debts are primarily business debts	<b>Type of Debtor</b> (Form of Organization) <input type="checkbox"/> Individual (Includes Joint Debtor) <input checked="" type="checkbox"/> Corporation (Includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)  _____	<b>Nature of Business</b> (Check one box) <input type="checkbox"/> Health Care Business <input checked="" type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51)(B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	
<b>VENUE</b>  <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in the 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.  <input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner or partnership is pending in this District.	<b>FILING FEE</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached. <i>[If a child support creditor or its representative is a petitioner, and if the petitioner files the form specified in § 304(g) of the Bankruptcy Reform Act of 1994, no fee is required.]</i>		
<b>PENDING BANKRUPTCY CASE FILED BY OR AGAINST ANY PARTNER OR AFFILIATE OF THIS DEBTOR</b> (Report information for any additional cases on attached sheets.)			
Name of Debtor	Case Number	Date	
Relationship	District	Judge	
<b>ALLEGATIONS</b> (Check applicable boxes)  1. <input checked="" type="checkbox"/> Petitioner(s) are eligible to file this petition pursuant to 11 U.S.C. § 303(b). 2. <input checked="" type="checkbox"/> The debtor is a person against whom an order for relief may be entered under title 11 of the United States Code. 3.a. <input checked="" type="checkbox"/> The debtor is generally not paying such debtor's debts as they become due, unless such debts are the subject of a bona fide dispute as to liability or amount; or 3.b. <input type="checkbox"/> Within 120 days preceding the filing of this petition, a custodian, other than a trustee, receiver, or agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.		<b>COURT USE ONLY</b>	

Name of Debtor 1663 60th Street, LLC

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Case No. \_\_\_\_\_

**TRANSFER OF CLAIM**

Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).

**REQUEST FOR RELIEF**

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X/s/ Joseph M. Hershkowitz, member  
Signature of Petitioner or Representative (State title)

Frenkel, Hershkowitz & Shafran LLP January 10, 2019  
Name of Petitioner Date Signed

Name & Mailing Joseph M. Hershkowitz, member  
Address of Individual 49 West 37th Street  
Signing in Representative New York, NY 10018  
Capacity

Gabriel Del Virginia  
X/s/ LAW OFFICES OF GABRIEL DEL VIRGINIA January 10, 2019  
Signature of Attorney Date

LAW OFFICES OF GABRIEL DEL VIRGINIA  
Name of Attorney Firm (If any)

30 Wall Street,  
12th Floor,  
New York, NY 10005  
Address  
Telephone No. 212-371-5478

X/s/ Berel Strulowitz  
Signature of Petitioner or Representative (State title)

Berel Strulowitz January 10, 2019  
Name of Petitioner Date Signed

Name & Mailing Berel Strulowitz  
Address of Individual 89 Lorimer Street  
Signing in Representative Brooklyn, NY 11206  
Capacity

Gabriel Del Virginia  
X/s/ LAW OFFICES OF GABRIEL DEL VIRGINIA January 10, 2019  
Signature of Attorney Date

LAW OFFICES OF GABRIEL DEL VIRGINIA  
Name of Attorney Firm (If any)

30 Wall Street,  
12th Floor,  
New York, NY 10005  
Address  
Telephone No. 212-371-5478

X/s/ Joseph Lax  
Signature of Petitioner or Representative (State title)

Joseph Lax January 10, 2019  
Name of Petitioner Date Signed

Name & Mailing Joseph Lax  
Address of Individual 1660 60th street,  
Signing in Representative Brooklyn, NY 11214  
Capacity

Gabriel Del Virginia  
X/s/ LAW OFFICES OF GABRIEL DEL VIRGINIA January 10, 2019  
Signature of Attorney Date

LAW OFFICES OF GABRIEL DEL VIRGINIA  
Name of Attorney Firm (If any)

30 Wall Street,  
12th Floor,  
New York, NY 10005  
Address  
Telephone No. 212-371-5478

**PETITIONING CREDITORS**

Name and Address of Petitioner	Nature of Claim	Amount of Claim
Frenkel, Hershkowitz & Shafran LLP 49 West 37th Street New York, NY 10018	Legal services	6,000.00
Berel Strulowitz 89 Lorimer Street Brooklyn, NY 11206	Credit	25,000.00
Joseph Lax 1650 60th street, Brooklyn, NY 11214		200,000.00
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims 276,750.00

1 continuation sheets attached

Name of Debtor 1663 60th Street, LLC

**B5 (Official Form 5) (12/07) - Page 2**

Case No. \_\_\_\_\_

**TRANSFER OF CLAIM**

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**REQUEST FOR RELIEF**

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X/s/ \_\_\_\_\_  
Signature of Petitioner or Representative (State title)

Maidenberg Steel Corp January 10, 2019  
Name of Petitioner Date Signed

Name & Mailing  
Address of Individual  
Signing in Representative  
Capacity

X/s/ \_\_\_\_\_ January 10, 2019  
Signature of Attorney Date

\_\_\_\_\_  
Name of Attorney Firm (If any)

\_\_\_\_\_  
Address  
Telephone No. \_\_\_\_\_

X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)

\_\_\_\_\_  
Name of Petitioner Date Signed

Name & Mailing  
Address of Individual  
Signing in Representative  
Capacity

X \_\_\_\_\_  
Signature of Attorney Date

\_\_\_\_\_  
Name of Attorney Firm (If any)

\_\_\_\_\_  
Address  
Telephone No. \_\_\_\_\_

X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)

\_\_\_\_\_  
Name of Petitioner Date Signed

Name & Mailing  
Address of Individual  
Signing in Representative  
Capacity

X \_\_\_\_\_  
Signature of Attorney Date

\_\_\_\_\_  
Name of Attorney Firm (If any)

\_\_\_\_\_  
Address  
Telephone No. \_\_\_\_\_

**PETITIONING CREDITORS**

Name and Address of Petitioner	Nature of Claim	Amount of Claim
Maidenberg Steel Corp 2550 W 13th St Brooklyn, NY 11230	Contractor	45,750.00
Name and Address of Petitioner	Nature of Claim	Amount of Claim
Name and Address of Petitioner	Nature of Claim	Amount of Claim
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims 276,750.00