

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

SOUTHERN 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**

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. **Debtor's name** King Displays, Inc.

2. **All other names debtor used in the last 8 years**  
Include any assumed names, trade names and *doing business as* names

3. **Debtor's federal Employer Identification Number (EIN)** 13-0916565

4. <b>Debtor's address</b>	<b>Principal place of business</b>	<b>Mailing address, if different from principal place of business</b>
	<u>333 West 52 Street</u> <u>New York, NY 10019</u> Number, Street, City, State & ZIP Code	_____ P.O. Box, Number, Street, City, State & ZIP Code
	<u>New York</u> County	<b>Location of principal assets, if different from principal place of business</b> _____ Number, Street, City, State & ZIP Code

5. **Debtor's website (URL)** \_\_\_\_\_

6. **Type of debtor**

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

Partnership (excluding LLP)

Other. Specify: \_\_\_\_\_

Debtor King Displays, Inc.  
Name

Case number (if known) \_\_\_\_\_

**7. Describe debtor's business**

A. Check one:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. Check all that apply

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

\_\_\_\_\_

**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

- Chapter 7
- Chapter 9

Chapter 11. Check all that apply:

- Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- No.
- Yes.

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 King Displays, Inc.  
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**

1-49

50-99

100-199

200-999

1,000-5,000

5001-10,000

10,001-25,000

25,001-50,000

50,001-100,000

More than 100,000

**15. Estimated Assets**

\$0 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$500,000

\$500,001 - \$1 million

\$1,000,001 - \$10 million

\$10,000,001 - \$50 million

\$50,000,001 - \$100 million

\$100,000,001 - \$500 million

\$500,000,001 - \$1 billion

\$1,000,000,001 - \$10 billion

\$10,000,000,001 - \$50 billion

More than \$50 billion

**16. Estimated liabilities**

\$0 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$500,000

\$500,001 - \$1 million

\$1,000,001 - \$10 million

\$10,000,001 - \$50 million

\$50,000,001 - \$100 million

\$100,000,001 - \$500 million

\$500,000,001 - \$1 billion

\$1,000,000,001 - \$10 billion

\$10,000,000,001 - \$50 billion

More than \$50 billion

Debtor King Displays, Inc.  
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 January , 2018  
MM / DD / YYYY

**X** /s/ Wayne Sapper  
Signature of authorized representative of debtor  
  
Title Principal

Wayne Sapper  
Printed name

**18. Signature of attorney**

**X** /s/ Gabriel Del Virginia, Esq.  
Signature of attorney for debtor

Date January , 2018  
MM / DD / YYYY

Gabriel Del Virginia, Esq.  
Printed name

LAW OFFICES OF GABRIEL DEL VIRGINIA  
Firm name

30 Wall Street,  
12th Floor,  
New York, NY 10005  
Number, Street, City, State & ZIP Code

Contact phone 212-371-5478 Email address gabriel.delvirginia@verizon.net

GDV-4951  
Bar number and State

**Fill in this information to identify the case:**

Debtor name King Displays, Inc.

United States Bankruptcy Court for the: SOUTHERN 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**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration \_\_\_\_\_

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

Executed on January , 2018  /s/ Wayne Sapper  
Signature of individual signing on behalf of debtor

Wayne Sapper  
Printed name

Principal  
Position or relationship to debtor

**Fill in this information to identify the case:**  
 Debtor name King Displays, Inc.  
 United States Bankruptcy Court for the: SOUTHERN 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 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
A&J Visual Solution, Inc. 884 McDonald Avenue Brooklyn, NY 11218		Business Debt				\$15,478.62
Ace Banner & Flag Co., Inc. 107 West 27th Street New York, NY 10010		Business Debt				\$6,730.00
American Expres/Starwood PO Box 1270 Newark, NJ 07101-1270		Credit Card				\$6,845.09
American Express/Delta PO Box 1270 Newark, NJ 07101-1270		Credit Card				\$5,642.32
Andrew Crabtree 225 Broadhollow Road Suite 303 Melville, NY 11747		Business Debt				\$18,803.03
B.C.I LLC Imaging Supplies 287 Keap Street Suite #2 Brooklyn, NY 11211		Business Debt				\$5,729.00
City Expeditor Inc. 25 West 26th Street New York, NY 10010		Business Debt				\$5,032.11

Debtor King Displays, Inc.  
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
EFI/ VUTEK PO.Box 742366 Los Angeles, CA 90074		Business Debt				\$38,756.22
EFI/Service -GS-3200 ?		Business Debt				\$31,868.74
Empire Blue Cross/ Blue Shield PO.Box 11792 Newark, NJ 07101		Health Insurance				\$5,396.88
Erie Insurance 100 Erie Insurance Place Erie, PA 16530		Insurance				\$10,728.72
Hewlet-Packard Company PO.Box 101149 Atlanta, GA 30392		Business Debt				\$11,473.33
HSBC Bank USA NA One HSBC Center 18 Floor Buffalo, NY 14203		Business Revolving line of credit				\$340,000.00
Interstate Sign Crafters 130 Commerce Road Boynton Beach, FL 33426		Business Debt				\$17,189.67
North Shore Neon Sign Co. Inc. 295 Skidmore Road Deer Park, NY 11729		Business Debt				\$11,600.00
Ronald Reddy/P.M. Reddy 580 East 134th Street Bronx, NY 10454		Business Debt				\$39,000.00
S & F Supplies Inc. 93 Emerson Place Brooklyn, NY 11205		Business Debt				\$10,348.87
SFDS LLC. 239 Java Street Brooklyn, NY 11222		Business Debt				\$9,500.00
Star Outdoor LLC 517 West 35th Street New York, NY 10001		Business Debt				\$17,504.97

Debtor King Displays, Inc.  
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
Time Circle Associates, LLC c/o Borah Goldstein Altschuler 377 Broadway-6th Floor New York, NY 10013		Litigation claim-unexpired lease of nonresidential real property	Disputed Subject to Setoff			\$125,044.00



**Fill in this information to identify the case:**

Debtor name King Displays, Inc.

United States Bankruptcy Court for the: SOUTHERN 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**

12/15

**Part 1: Summary of Assets**

1. <b>Schedule A/B: Assets-Real and Personal Property</b> (Official Form 206A/B)	
1a. <b>Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <u>0.00</u>
1b. <b>Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <u>334,724.00</u>
1c. <b>Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <u>334,724.00</u>

**Part 2: Summary of Liabilities**

2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (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. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)		
3a. <b>Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <u>0.00</u>	
3b. <b>Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <u>788,184.10</u>	
4. <b>Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <u>788,184.10</u>	

**Fill in this information to identify the case:**

Debtor name King Displays, Inc.

United States Bankruptcy Court for the: SOUTHERN 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

12/15

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

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

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

### Part 1: Cash and cash equivalents

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

- No. Go to Part 2.  
 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	
--	-----------------	---------------------------------	--

3.1. <u>HSBC Bank</u>	<u>Checking</u>		<u>\$12,000.00</u>
-----------------------	-----------------	--	--------------------

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.

\$12,000.00

### 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>Abraham and Sons</u> <u>(Rent)</u>		<u>\$65,000.00</u>
---	--	--------------------

7.2. <u>ConEdison</u> <u>(Utility Deposit)</u>		<u>\$1,000.00</u>
---	--	-------------------

7.3. <u>Empire Blue Cross &amp; Blue Shield</u> <u>(Health Insurance Deposit)</u>		<u>\$5,400.00</u>
--	--	-------------------

Debtor King Displays, Inc. Case number (If known) \_\_\_\_\_  
Name

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

9. **Total of Part 2.**

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

\$71,400.00

**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: 233,724.00 - 0.00 = ... \$233,724.00  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 17,600.00 - 0.00 = ... \$17,600.00  
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.

\$251,324.00

**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.

**Part 8: Machinery, equipment, and vehicles**

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- No. Go to Part 9.

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

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.

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
- Yes Fill in the information below.

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

**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. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	\$12,000.00	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	\$71,400.00	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	\$251,324.00	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	\$0.00	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	\$0.00	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	\$0.00	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	\$0.00	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	\$0.00	
88. <b>Real property.</b> <i>Copy line 56, Part 9.</i> .....>		\$0.00
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	\$0.00	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. <b>Total.</b> Add lines 80 through 90 for each column	\$334,724.00	+ 91b. \$0.00
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		\$334,724.00

**Fill in this information to identify the case:**

Debtor name King Displays, Inc.

United States Bankruptcy Court for the: SOUTHERN 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**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

**Fill in this information to identify the case:**

Debtor name King Displays, Inc.

United States Bankruptcy Court for the: SOUTHERN 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.

**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.

		Amount of claim
3.1	<b>Nonpriority creditor's name and mailing address</b> A&J Visual Solution, Inc. 884 McDonald Avenue Brooklyn, NY 11218 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$15,478.62
3.2	<b>Nonpriority creditor's name and mailing address</b> A2Z Graphics, Inc. 289 Gorge Road #2 Cliffside Park, NJ 07010 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$605.00
3.3	<b>Nonpriority creditor's name and mailing address</b> Ace Banner & Flag Co., Inc. 107 West 27th Street New York, NY 10010 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$6,730.00
3.4	<b>Nonpriority creditor's name and mailing address</b> Alberts Printing 265 W. 37th Street Suite 1204 New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$605.00

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

3.5	<b>Nonpriority creditor's name and mailing address</b> Always Express 301 Penhorn Avenue Secaucus, NJ 07094 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$550.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	<b>Nonpriority creditor's name and mailing address</b> American Expres/Starwood PO Box 1270 Newark, NJ 07101-1270 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>5007</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$6,845.09 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	<b>Nonpriority creditor's name and mailing address</b> American Express PO.Box 2855 New York, NY 10116 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>6003</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$153.01 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	<b>Nonpriority creditor's name and mailing address</b> American Express/Delta PO Box 1270 Newark, NJ 07101-1270 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>7009</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$5,642.32 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	<b>Nonpriority creditor's name and mailing address</b> American Office Solutions 69 East Jericho Turnpike Mineola, NY 11501 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$84.39 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	<b>Nonpriority creditor's name and mailing address</b> Andrew Crabtree 225 Broadhollow Road Suite 303 Melville, NY 11747 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$18,803.03 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	<b>Nonpriority creditor's name and mailing address</b> B.C.I LLC Imaging Supplies 287 Keap Street Suite #2 Brooklyn, NY 11211 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$5,729.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	<b>Nonpriority creditor's name and mailing address</b> Ben Sak/ Digital Imaging Solut 307 West 38TH Street Store #5 New York, NY 10018 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$2,490.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes



Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

3.13	<b>Nonpriority creditor's name and mailing address</b> BP/Amoco PO. Box 70887 Charlotte, NC 28272 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$461.38
3.14	<b>Nonpriority creditor's name and mailing address</b> City Expeditor Inc. 25 West 26th Street New York, NY 10010 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,032.11
3.15	<b>Nonpriority creditor's name and mailing address</b> Colex Imaging Inc. 55-57 Bushes Lane Elmwood Park, NJ 07407 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,322.70
3.16	<b>Nonpriority creditor's name and mailing address</b> Consolidated Edison JAF Station PO. Box 1702 New York, NY 10116 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,106.88
3.17	<b>Nonpriority creditor's name and mailing address</b> De Lage Landen PO.Box 41602 Philadelphia, PA 19101 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$860.18
3.18	<b>Nonpriority creditor's name and mailing address</b> Digital City Services 250 West 40th Street Ground Floor New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$245.85
3.19	<b>Nonpriority creditor's name and mailing address</b> Diversified Display Products 777 Ramsey Avenue Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,610.16

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

3.20	<b>Nonpriority creditor's name and mailing address</b> E&T Plastics 45-45 37th Street Long Island City, NY 11101 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$740.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.21	<b>Nonpriority creditor's name and mailing address</b> EFI/ VUTEK PO.Box 742366 Los Angeles, CA 90074 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$38,756.22 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	<b>Nonpriority creditor's name and mailing address</b> EFI/Service -GS-3200 ? <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$31,868.74 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	<b>Nonpriority creditor's name and mailing address</b> Empire Blue Cross/ Blue Shield PO.Box 11792 Newark, NJ 07101 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$5,396.88 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Health Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	<b>Nonpriority creditor's name and mailing address</b> Erie Insurance 100 Erie Insurance Place Erie, PA 16530 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>0032</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$1,575.36 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.25	<b>Nonpriority creditor's name and mailing address</b> Erie Insurance 100 Erie Insurance Place Erie, PA 16530 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>0106</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$4,776.86 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	<b>Nonpriority creditor's name and mailing address</b> Erie Insurance 100 Erie Insurance Place Erie, PA 16530 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>0418</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$1,776.04 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	<b>Nonpriority creditor's name and mailing address</b> Erie Insurance 100 Erie Insurance Place Erie, PA 16530 <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>0113</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> _____ \$10,728.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

<b>3.28</b>	<b>Nonpriority creditor's name and mailing address</b> Hartford Insurance 3600 Wiseman Boulevard San Antonio, TX 78251 <b>Date(s) debt was incurred</b> ____ <b>Last 4 digits of account number</b> ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,415.19</u>
<b>3.29</b>	<b>Nonpriority creditor's name and mailing address</b> Hewlet-Packard Company PO.Box 101149 Atlanta, GA 30392 <b>Date(s) debt was incurred</b> ____ <b>Last 4 digits of account number</b> <u>3000</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$11,473.33</u>
<b>3.30</b>	<b>Nonpriority creditor's name and mailing address</b> Hewlet-Packard Company PO.Box 101149 Atlanta, GA 30392 <b>Date(s) debt was incurred</b> ____ <b>Last 4 digits of account number</b> ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$750.00</u>
<b>3.31</b>	<b>Nonpriority creditor's name and mailing address</b> HSBC Bank USA NA One HSBC Center 18 Floor Buffalo, NY 14203 <b>Date(s) debt was incurred</b> <u>June 11, 2008</u> <b>Last 4 digits of account number</b> ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Revolving line of credit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$340,000.00</u>
<b>3.32</b>	<b>Nonpriority creditor's name and mailing address</b> Image King Visuals 309 Mount Pleasant Avenue Suite # 521 Mamaroneck, NY 10543 <b>Date(s) debt was incurred</b> ____ <b>Last 4 digits of account number</b> ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,165.00</u>
<b>3.33</b>	<b>Nonpriority creditor's name and mailing address</b> Interstate Sign Crafters 130 Commerce Road Boynton Beach, FL 33426 <b>Date(s) debt was incurred</b> ____ <b>Last 4 digits of account number</b> ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$17,189.67</u>
<b>3.34</b>	<b>Nonpriority creditor's name and mailing address</b> IRS/Centralized Insolvenc Post Office Box 21126 Philadelphia, PA 19114 <b>Date(s) debt was incurred</b> ____ <b>Last 4 digits of account number</b> ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Notice</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

**3.35 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$361.11  
Janovic/Plaza Inc.  
30-35 Thomson Avenue  
Long Island City, NY 11101  
 Contingent  
 Unliquidated  
 Disputed  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.36 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$85.00  
Keystone Printing  
21C East Madison Avenue  
Dumont, NJ 07628  
 Contingent  
 Unliquidated  
 Disputed  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.37 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$875.00  
Laird Plastics  
PO.Box 934226  
Atlanta, GA 31193  
 Contingent  
 Unliquidated  
 Disputed  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.38 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$705.00  
Laumont  
333 West 52nd Street  
New York, NY 10019  
 Contingent  
 Unliquidated  
 Disputed  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.39 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$23.00  
Leister Technologies LLC  
1275 Hamilton parkway  
Itasca, IL 60143  
 Contingent  
 Unliquidated  
 Disputed  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
**Basis for the claim:** Business Debt  
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.* \_\_\_\_\_ \$466.00  
Lenoble Lumber Co. Inc.  
38-20 Review Avenue  
Long Island City, NY 11101  
 Contingent  
 Unliquidated  
 Disputed  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.41 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$499.00  
Lexus Financial Services  
PO.Box ???  
Baltimore, MD 21297  
 Contingent  
 Unliquidated  
 Disputed  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.42 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$4.00  
Local 8A-28A  
36-16/18 33rd Street  
2nd Floor  
Long Island City, NY 11106  
 Contingent  
 Unliquidated  
 Disputed  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

3.43	<b>Nonpriority creditor's name and mailing address</b> Local 8A-28A-401k Retirement 36-16/18 33rd Street 2nd Floor Long Island City, NY 11106 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$108.77
3.44	<b>Nonpriority creditor's name and mailing address</b> Local 8A-28A-Welfare (Medical) 36-16/18 33rd Street 2nd Floor Long Island City, NY 11106 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Medical bill</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$284.16
3.45	<b>Nonpriority creditor's name and mailing address</b> Metropolitan Lumber & Hardware 617-11th Avenue New York, NY 10036 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59.05
3.46	<b>Nonpriority creditor's name and mailing address</b> MMT Metromedia Technologies P.O.Box 28350 New York, NY 10087 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,333.46
3.47	<b>Nonpriority creditor's name and mailing address</b> North Shore Neon Sign Co. Inc. 295 Skidmore Road Deer Park, NY 11729 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,600.00
3.48	<b>Nonpriority creditor's name and mailing address</b> NYC Department of Finance Attn. Legal Affairs 345 Adams Street-3rd Floor Brooklyn, NY 11201 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Notice</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.49	<b>Nonpriority creditor's name and mailing address</b> NYS Dept of Tax & Finance Bankruptcy Unit-TCD Building 8, Room 455 W.A. Harr Albany, NY 12227 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Notice</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

**3.50 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$392.51  
Paul Rivera Ins./Unim  
?  
?  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
 Contingent  
 Unliquidated  
 Disputed  
**Basis for the claim:** Insurance  
Is the claim subject to offset?  No  Yes

**3.51 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$3,368.25  
Peeg media/Color By Pergament  
PO.Box 791485  
Baltimore, MD 21279  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
 Contingent  
 Unliquidated  
 Disputed  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.52 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$500.00  
Perry Ptashnik, CPA  
21 west 38th Street  
9th Floor  
New York, NY 10018  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
 Contingent  
 Unliquidated  
 Disputed  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.53 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$1,258.72  
Quality Media & Laminating  
285 State Street  
Suite One  
North Haven, CT 06473  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
 Contingent  
 Unliquidated  
 Disputed  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.54 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$2,175.00  
Robert S. Weingast & Associate  
Garden City Center  
100 Quintin Roosevelt Blvd.  
Garden City, NY 11530  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
 Contingent  
 Unliquidated  
 Disputed  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.55 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$39,000.00  
Ronald Reddy/P.M. Reddy  
580 East 134th Street  
Bronx, NY 10454  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
 Contingent  
 Unliquidated  
 Disputed  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.56 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$1,838.42  
Royal Waste Services  
187-40 Hollis Avenue  
Hollis, NY 11423  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
 Contingent  
 Unliquidated  
 Disputed  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

**3.57 Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** *Check all that apply.* \_\_\_\_\_ \$10,348.87  
S & F Supplies Inc.  
93 Emerson Place  
Brooklyn, NY 11205  
**Date(s) debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_  
 Contingent  
 Unliquidated  
 Disputed  
**Basis for the claim:** Business Debt  
Is the claim subject to offset?  No  Yes

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

**3.58** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$2,700.00  
S-Qbisim Corp  Contingent  
1578 Sussex Turnpike  Unliquidated  
Randolph, NJ 07869  Disputed  
**Date(s) debt was incurred** \_\_\_\_\_ **Basis for the claim:** Business Debt  
**Last 4 digits of account number** \_\_\_\_\_ Is the claim subject to offset?  No  Yes

**3.59** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$9,500.00  
SFDS LLC.  Contingent  
239 Java Street  Unliquidated  
Brooklyn, NY 11222  Disputed  
**Date(s) debt was incurred** \_\_\_\_\_ **Basis for the claim:** Business Debt  
**Last 4 digits of account number** \_\_\_\_\_ Is the claim subject to offset?  No  Yes

**3.60** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$17,504.97  
Star Outdoor LLC  Contingent  
517 West 35th Street  Unliquidated  
New York, NY 10001  Disputed  
**Date(s) debt was incurred** \_\_\_\_\_ **Basis for the claim:** Business Debt  
**Last 4 digits of account number** \_\_\_\_\_ Is the claim subject to offset?  No  Yes

**3.61** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$860.12  
Stericycle Specialty Waste Sol  Contingent  
28161 North Keith Drive  Unliquidated  
Lake Forest, IL 60045  Disputed  
**Date(s) debt was incurred** \_\_\_\_\_ **Basis for the claim:** Business Debt  
**Last 4 digits of account number** \_\_\_\_\_ Is the claim subject to offset?  No  Yes

**3.62** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$740.79  
Testrite Visual Products Inc.  Contingent  
216 South Newman Street  Unliquidated  
Hackensack, NJ 07601  Disputed  
**Date(s) debt was incurred** \_\_\_\_\_ **Basis for the claim:** Business Debt  
**Last 4 digits of account number** \_\_\_\_\_ Is the claim subject to offset?  No  Yes

**3.63** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$1,842.78  
TGI Office Automation  Contingent  
120 3rd Street  Unliquidated  
Brooklyn, NY 11231  Disputed  
**Date(s) debt was incurred** \_\_\_\_\_ **Basis for the claim:** Business Debt  
**Last 4 digits of account number** \_\_\_\_\_ Is the claim subject to offset?  No  Yes

**3.64** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$325.00  
Theatrical Index  Contingent  
850 Seventh Avenue  Unliquidated  
Suite 1102  Disputed  
New York, NY 10019  
**Date(s) debt was incurred** \_\_\_\_\_ **Basis for the claim:** Business Debt  
**Last 4 digits of account number** \_\_\_\_\_ Is the claim subject to offset?  No  Yes

Debtor King Displays, Inc. Case number (if known) \_\_\_\_\_  
Name

**3.65 Nonpriority creditor's name and mailing address**  
 Time Circle Associates, LLC  
 c/o Borah Goldstein Altschuler  
 377 Broadway-6th Floor  
 New York, NY 10013  
 Date(s) debt was incurred \_\_\_\_  
 Last 4 digits of account number \_\_\_\_

**As of the petition filing date, the claim is:** *Check all that apply.* \$125,044.00  
 Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:** Litigation claim-unexpired lease of nonresidential real property

Is the claim subject to offset?  No  Yes

**3.66 Nonpriority creditor's name and mailing address**  
 Time Warner Cable  
 PO.Box 11820  
 Newark, NJ 07101  
 Date(s) debt was incurred \_\_\_\_  
 Last 4 digits of account number \_\_\_\_

**As of the petition filing date, the claim is:** *Check all that apply.* \$414.39  
 Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:** Utility Bill

Is the claim subject to offset?  No  Yes

**3.67 Nonpriority creditor's name and mailing address**  
 U. S. TRUSTEES' OFFICE-SDNY  
 U.S. Federal Office Building  
 201 Varick Street, Suite 1006  
 New York, NY 10014  
 Date(s) debt was incurred \_\_\_\_  
 Last 4 digits of account number \_\_\_\_

**As of the petition filing date, the claim is:** *Check all that apply.* Unknown  
 Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:** Notice

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
4.1 Diversified Display Products PO.Box 913 Hillside, NJ 07205	Line <u>3.19</u> <input type="checkbox"/> Not listed. Explain _____	____
4.2 S & F Supplies Inc. PO.Box 050071 Brooklyn, NY 11205	Line <u>3.57</u> <input type="checkbox"/> Not listed. Explain _____	____

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

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

	Total of claim amounts
5a. Total claims from Part 1	\$ <u>0.00</u>
5b. Total claims from Part 2	\$ <u>788,184.10</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	\$ <u>788,184.10</u>



**Fill in this information to identify the case:**

Debtor name King Displays, Inc.

United States Bankruptcy Court for the: SOUTHERN 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

State the term remaining

List the contract number of any government contract \_\_\_\_\_

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

State the term remaining

List the contract number of any government contract \_\_\_\_\_

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

State the term remaining

List the contract number of any government contract \_\_\_\_\_

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

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Fill in this information to identify the case:**

Debtor name King Displays, Inc.

United States Bankruptcy Court for the: SOUTHERN 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	Mr. Wayne Sapper	39 Brodil Court Closter, NJ 07624	Time Circle Associates, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> _____ E/F <u>3.65</u> <input type="checkbox"/> G _____

**Fill in this information to identify the case:**

Debtor name King Displays, Inc.  
 United States Bankruptcy Court for the: SOUTHERN 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)

**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

**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

**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.

Debtor King Displays, Inc.

Case number (if known) \_\_\_\_\_

None

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

**6. Setoffs**

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

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

**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.

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Time Circle Associates, LLC -vs- King Displays, Inc. and ABC Corp. 080084	Commercial Non-Payment	Civil Court of the City of New York County of New York; Part 52	<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
------------------------------	---	-------------	-------

**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**

Debtor King Displays, Inc.

Case number (if known) \_\_\_\_\_

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
11.1. Law Offices of Gabriel Del Virginia 30 Wall Street 12th Floor New York, NY 10055	Attorney Fees	December, 2016	\$11,170.00

Email or website address \_\_\_\_\_

Who made the payment, if not debtor? \_\_\_\_\_

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

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device. Do not include transfers already listed on this statement.

None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

**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
-----------------------------------	--	------------------------	-----------------------

**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

Address	Dates of occupancy From-To
---------	-------------------------------

**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
---------------------------	--	---

Debtor King Displays, Inc.

Case number (if known) \_\_\_\_\_

**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

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?

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?

**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.

Debtor King Displays, Inc.

Case number (if known) \_\_\_\_\_

*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
---------------------------	-------------------------------------	--------------------	----------------

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
-----------------------	---------------------------------------	-----------------------------	----------------

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
-----------------------	---------------------------------------	-----------------------------	----------------

**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

Business name address	Describe the nature of the business	Employer identification number <small>Do not include Social Security number or ITIN.</small>	Dates business existed EIN:            13-0916565 From-To
25.1. King Displays, Inc. 333 West 52 Street New York, NY 10019	Digital Printing		

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
------------------	----------------------------

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

Debtor King Displays, Inc.

Case number (if known) \_\_\_\_\_

**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.

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.

**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**

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**



Debtor King Displays, Inc.

Case number (if known) \_\_\_\_\_

**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 January , 2018

/s/ Wayne Sapper  
Signature of individual signing on behalf of the debtor

Wayne Sapper  
Printed name

Position or relationship to debtor Principal

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

- No
- Yes

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

In re King Displays, Inc.

Debtor(s)

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

Chapter 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<u>11,170.00</u>
Prior to the filing of this statement I have received .....	\$	<u>11,170.00</u>
Balance Due .....	\$	<u>0.00</u>

2. \$ 1,177.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor       Other (specify):

4. The source of compensation to be paid to me is:

Debtor       Other (specify):

5.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January , 2018

*Date*

/s/ Gabriel Del Virginia, Esq.

Gabriel Del Virginia, Esq. GDV-4951

*Signature of Attorney*

LAW OFFICES OF GABRIEL DEL VIRGINIA

30 Wall Street,

12th Floor,

New York, NY 10005

212-371-5478 Fax: 212-371-0460

gabriel.delvirginia@verizon.net

*Name of law firm*

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

In re King Displays, Inc.

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
---	----------------	----------------------	------------------

Mr. Wayne Sapper 39 Brodil Court Closter, NJ 07624			
--	--	--	--

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

I, the Principal of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date January , 2018

Signature /s/ Wayne Sapper  
Wayne Sapper

*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  
Southern District of New York**

In re King Displays, Inc. Debtor(s) Case No. \_\_\_\_\_  
Chapter 11

**VERIFICATION OF CREDITOR MATRIX**

I, the Principal of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: January , 2018 /s/ Wayne Sapper  
Wayne Sapper/Principal  
Signer/Title

A&J VISUAL SOLUTION, INC.  
884 MCDONALD AVENUE  
BROOKLYN, NY 11218

A2Z GRAPHICS, INC.  
289 GORGE ROAD  
#2  
CLIFFSIDE PARK, NJ 07010

ACE BANNER & FLAG CO., INC.  
107 WEST 27TH STREET  
NEW YORK, NY 10010

ALBERTS PRINTING  
265 W. 37TH STREET  
SUITE 1204  
NEW YORK, NY 10018

ALWAYS EXPRESS  
301 PENHORN AVENUE  
SECAUCUS, NJ 07094

AMERICAN EXPRES/STARWOOD  
PO BOX 1270  
NEWARK, NJ 07101-1270

AMERICAN EXPRESS  
PO.BOX 2855  
NEW YORK, NY 10116

AMERICAN EXPRESS/DELTA  
PO BOX 1270  
NEWARK, NJ 07101-1270

AMERICAN OFFICE SOLUTIONS  
69 EAST JERICHO TURNPIKE  
MINEOLA, NY 11501

ANDREW CRABTREE  
225 BROADHOLLOW ROAD  
SUITE 303  
MELVILLE, NY 11747

B.C.I LLC IMAGING SUPPLIES  
287 KEAP STREET  
SUITE #2  
BROOKLYN, NY 11211

BEN SAK/ DIGITAL IMAGING SOLUT  
307 WEST 38TH STREET  
STORE #5  
NEW YORK, NY 10018

BP/AMOCO  
PO. BOX 70887  
CHARLOTTE, NC 28272

CITY EXPEDITOR INC.  
25 WEST 26TH STREET  
NEW YORK, NY 10010

COLEX IMAGING INC.  
55-57 BUSHES LANE  
ELMWOOD PARK, NJ 07407

CONSOLIDATED EDISON  
JAF STATION  
PO. BOX 1702  
NEW YORK, NY 10116

DE LAGE LANDEN  
PO.BOX 41602  
PHILADELPHIA, PA 19101

DIGITAL CITY SERVICES  
250 WEST 40TH STREET  
GROUND FLOOR  
NEW YORK, NY 10018

DIVERSIFIED DISPLAY PRODUCTS  
777 RAMSEY AVENUE

DIVERSIFIED DISPLAY PRODUCTS  
PO.BOX 913  
HILLSIDE, NJ 07205

E&T PLASTICS  
45-45 37TH STREET  
LONG ISLAND CITY, NY 11101

EFI/ VUTEK  
PO.BOX 742366  
LOS ANGELES, CA 90074

EFI/SERVICE -GS-3200  
?

EMPIRE BLUE CROSS/ BLUE SHIELD  
PO.BOX 11792  
NEWARK, NJ 07101

ERIE INSURANCE  
100 ERIE INSURANCE PLACE  
ERIE, PA 16530

HARTFORD INSURANCE  
3600 WISEMAN BOULEVARD  
SAN ANTONIO, TX 78251

HEWLET-PACKARD COMPANY  
PO.BOX 101149  
ATLANTA, GA 30392

HSBC BANK USA NA  
ONE HSBC CENTER  
18 FLOOR  
BUFFALO, NY 14203

IMAGE KING VISUALS  
309 MOUNT PLEASANT AVENUE  
SUITE # 521  
MAMARONECK, NY 10543

INTERSTATE SIGN CRAFTERS  
130 COMMERCE ROAD  
BOYNTON BEACH, FL 33426

IRS/CENTRALIZED INSOLVENC  
POST OFFICE BOX 21126  
PHILADELPHIA, PA 19114

JANOVIC/PLAZA INC.  
30-35 THOMSON AVENUE  
LONG ISLAND CITY, NY 11101

KEYSTONE PRINTING  
21C EAST MADISON AVENUE  
DUMONT, NJ 07628

LAIRD PLASTICS  
PO.BOX 934226  
ATLANTA, GA 31193

LAUMONT  
333 WEST 52ND STREET  
NEW YORK, NY 10019

LEISTER TECHNOLOGIES LLC  
1275 HAMILTON PARKWAY  
ITASCA, IL 60143

LENOBLE LUMBER CO. INC.  
38-20 REVIEW AVENUE  
LONG ISLAND CITY, NY 11101

LEXUS FINANCIAL SERVICES  
PO.BOX ???  
BALTIMORE, MD 21297

LOCAL 8A-28A  
36-16/18 33RD STREET  
2ND FLOOR  
LONG ISLAND CITY, NY 11106

LOCAL 8A-28A-401K RETIREMENT  
36-16/18 33RD STREET  
2ND FLOOR  
LONG ISLAND CITY, NY 11106

LOCAL 8A-28A-WELFARE (MEDICAL)  
36-16/18 33RD STREET  
2ND FLOOR  
LONG ISLAND CITY, NY 11106



METROPOLITAN LUMBER & HARDWARE  
617-11TH AVENUE  
NEW YORK, NY 10036

MMT METROMEDIA TECHNOLOGIES  
PO.BOX 28350  
NEW YORK, NY 10087

MR. WAYNE SAPPER  
39 BRODIL COURT  
CLOSTER, NJ 07624

NORTH SHORE NEON SIGN CO. INC.  
295 SKIDMORE ROAD  
DEER PARK, NY 11729

NYC DEPARTMENT OF FINANCE  
ATTN. LEGAL AFFAIRS  
345 ADAMS STREET-3RD FLOOR  
BROOKLYN, NY 11201

NYS DEPT OF TAX & FINANCE  
BANKRUPTCY UNIT-TCD  
BUILDING 8, ROOM 455 W.A. HARR  
ALBANY, NY 12227

PAUL RIVERA INS./UNIM  
?  
?

PEEQ MEDIA/COLOR BY PERGAMENT  
PO.BOX 791485  
BALTIMORE, MD 21279

PERRY PTASHNIK, CPA  
21 WEST 38TH STREET  
9TH FLOOR  
NEW YORK, NY 10018

QUALITY MEDIA & LAMINATING  
285 STATE STREET  
SUITE ONE  
NORTH HAVEN, CT 06473

ROBERT S. WEINGAST & ASSOCIATE  
GARDEN CITY CENTER  
100 QUINTIN ROOSEVELT BLVD.  
GARDEN CITY, NY 11530

RONALD REDDY/P.M. REDDY  
580 EAST 134TH STREET  
BRONX, NY 10454

ROYAL WASTE SERVICES  
187-40 HOLLIS AVENUE  
HOLLIS, NY 11423

S & F SUPPLIES INC.  
93 EMERSON PLACE  
BROOKLYN, NY 11205

S & F SUPPLIES INC.  
PO.BOX 050071  
BROOKLYN, NY 11205

S-QBISIM CORP  
1578 SUSSEX TURNPIKE  
RANDOLPH, NJ 07869

SFDS LLC.  
239 JAVA STREET  
BROOKLYN, NY 11222

STAR OUTDOOR LLC  
517 WEST 35TH STREET  
NEW YORK, NY 10001

STERICYCLE SPECIALTY WASTE SOL  
28161 NORTH KEITH DRIVE  
LAKE FOREST, IL 60045

TESTRITE VISUAL PRODUCTS INC.  
216 SOUTH NEWMAN STREET  
HACKENSACK, NJ 07601

TGI OFFICE AUTOMATION  
120 3RD STREET  
BROOKLYN, NY 11231

THEATRICAL INDEX  
850 SEVENTH AVENUE  
SUITE 1102  
NEW YORK, NY 10019

TIME CIRCLE ASSOCIATES, LLC  
C/O BORAH GOLDSTEIN ALTSCHULER  
377 BROADWAY-6TH FLOOR  
NEW YORK, NY 10013

TIME WARNER CABLE  
PO.BOX 11820  
NEWARK, NJ 07101

U. S. TRUSTEES' OFFICE-SDNY  
U.S. FEDERAL OFFICE BUILDING  
201 VARICK STREET, SUITE 1006  
NEW YORK, NY 10014

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

In re King Displays, Inc.

Debtor(s)

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

Chapter 11

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for King Displays, Inc. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

January , 2018

Date

/s/ Gabriel Del Virginia, Esq.

Gabriel Del Virginia, Esq. GDV-4951

**Signature of Attorney or Litigant**

**Counsel for** King Displays, Inc.

LAW OFFICES OF GABRIEL DEL VIRGINIA

30 Wall Street,

12th Floor,

New York, NY 10005

212-371-5478 Fax:212-371-0460

gabriel.delvirginia@verizon.net