

IN RE:

Case No. _____

241 Main Street, Inc.

Chapter 11

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: August 9, 2017

Signature: /s/ Scott Parker
Scott Parker, Manager

Debtor

Date: _____

Signature: _____

Joint Debtor, if any

AJK Draft Line Cleaning
55 Alger Ave
Warwick, RI 02886

Ameripride Services, Inc.
10801 Wayzata Blvd
Minnetonka, MN 55305-5510

Ameripride Services, Inc.
PO Box 1390
Bemidji, MN 56619-1390

ASCAP
2675 Paces Ferry Rd SE Ste 350
Atlanta, GA 30339-4087

ASCAP
1900 Broadway
New York, NY 10023-7004

B.M. Rubbish Services Inc.
PO Box 814
North Kingstown, RI 02852-0607

Beacon Mutual
PO Box 416142
Boston, MA 02241-6142

BMI
PO Box 406741
Atlanta, GA 30384-6741

Calise & Sons Bakery, Inc.
2 Quality Dr
Lincoln, RI 02865-4266

Citizens Bank
PO Box 42014
Providence, RI 02940-2014

Corporate Service Company
222 Jefferson Blvd Ste 200
Warwick, RI 02888-3855

Corporation Service Company
222 Jefferson Blvd Ste 200
Warwick, RI 02888-3855

Craig L. Friedrichs, Esquire
Quarles & Brady LLP
2 N Central Ave
Phoenix, AZ 85004-2322

Cranston Welding Supply Co.
1425 Park Ave
Cranston, RI 02920-6628

CT Corporation System
450 Veterans Memorial Pkwy Ste 7A
East Providence, RI 02914-5315

DIRECTV, LLC
2260 E Imperial Hwy
El Segundo, CA 90245-3501

Division Of Taxation
Sales Tax Division
1 Capitol Hl
Providence, RI 02908-5816

E. Colby Cameron, Esquire
301 Promenade St
Providence, RI 02908-5720

Ecolab, Inc.
121 Ecolab Pl
St Paul, MN 55102

Gordon Food Service, Inc.
PO Box 1787
Grand Rapids, MI 49501-1787

Integrity Cleaning
9 Rosemont Ter
Providence, RI 02911-3125

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

Kent County Water Authority
1072 Main St
West Warwick, RI 02893-3746

Lynda L Laing Esq.
1 Davol Sq Ste 305
Providence, RI 02903-4755

M.S. Walker of Rhode Island, Inc.
16 Commercial Way
Warren, RI 02885-1637

Market Grinding, Inc.
201 W Grove St
Middleboro, MA 02346-1472

Michael R. Calise
2 Quality Dr
Lincoln, RI 02865-4266

Michael S. Kiernan, Esquire
91 Friendship St
Providence, RI 02903-3837

Michael W. Sweeney, Esquire
1 Financial Plz Ste 1800
Providence, RI 02903-2419

Myles Lineberry
52 Widow Sweets Rd
Exeter, RI 02822-2712

National Grid LNG LLC
280 Melrose St
Providence, RI 02907-2152

National Refrigeration, Inc.
3600 W Shore Rd
Warwick, RI 02886-5038

New England Control Tech, Inc.
105 Cowesett Ave
West Warwick, RI 02893-3228

Nextwave Entreprises, LLC
5757 Blue Lagoon Dr
Miami, FL 33126-2058

Nicole H. Daniel, Esquire
Dinsmore & Shohl, LLP
227 W Monroe St Ste 3850
Chicago, IL 60606-5085

NuCo2
PO Box 417902
Boston, MA 02241-7902

Oracle America
PO Box 203448
Dallas, TX 75320-3448

Patricia Antonelli, Esquire
Partridge, Snow & Hahn
40 Westminster St Ste 1100
Providence, RI 02903-2527

Patrick A. Rogers, Esquire
100 Westminster St Ste 1500
Providence, RI 02903-2395

Perkins Paper
640 John Hancock Rd
Taunton, MA 02780-7902

Providence Beverage
PO Box 1437
Coventry, RI 02816-0026

Quality Mechanical Services Inc.
52 Widow Sweets Rd
Exeter, RI 02822-2712

Reagan Plumbing & Health
235 Georgia Ave
Providence, RI 02905-4516

Rewards Network Establishment Services
2 N Riverside Plz Lbby
Chicago, IL 60606-2600

Rhode Island Distributing Company, LLC
119 Hopkins Hill Rd
West Greenwich, RI 02817-1709

RI Division of Taxation
1 Capitol Hl
Providence, RI 02908-5816

Richard E. Fleury, Esquire
33 College Hill Rd Ste 20F
Warwick, RI 02886-2746

Scott Parker
354 Old Forge Rd
East Greenwich, RI 02818-4616

SESAC
1900 Broadway
New York, NY 10023-7004

SHIV E.G. LLC
c/o Orange Leaf Yogurt
1000 Bald Hill Rd Ste 2
Warwick, RI 02886-0794

Shiv EG LLC
c/o Orange Leaf Yoguart
1000 Bald Hill Rd Ste 2
Warwick, RI 02886-0794

Sinel, Wilfand & Vinci
1150 New London Ave
Cranston, RI 02920-3036

Sysco Boston, LLC
1390 Enclave Pkwy
Houston, TX 77077-2025

Team Trivia N.E., LLC
225 Calvin St
Fall River, MA 02720-4332

The Hartford
PO Box 2907
Hartford, CT 06104-2907

Top This Pizza Crusts, Inc.
24 Corliss St # 6044
Providence, RI 02940-7703

Total Beverage System
137 Hansen Rd
Norwich, CT 06360-9402

Town of East Greenwich
PO Box 150436
Hartford, CT 06115-0436

Vend Lease Company
8100 Sandpiper Cir
Baltimore, MD 21236-4991

Verizon Business Network Services Inc.
1 Verizon Way
Basking Ridge, NJ 07920-1025

William T. Heaton
1425 Park Ave
Cranston, RI 02920-6628

Fill in this information to identify the case:

Debtor name 241 Main Street, Inc.
 United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND, PROVIDENCE DIVISION
 Case number (if known) _____

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year	Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date: From 1/01/2017 to Filing Date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$345,082.00
For prior year: From 1/01/2016 to 12/31/2016	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$692,905.00
For year before that: From 1/01/2015 to 12/31/2015	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$777,951.00

2. Non-business revenue

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

None.

Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply

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

Debtor 241 Main Street, Inc.

Case number (if known) _____

adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

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

None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

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

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Gordon Food Service, Inc. v. 241 Main Street Incorporated KC-2016-0762	Civil	Kent County Superior Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Rewards Network Establishment Services, Inc, v. Debtor 2016 L 01051	Civil	Circuit Court Cook County Illinois	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

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

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

Debtor **241 Main Street, Inc.**

Case number (if known)

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

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

None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Peter M. Iascone & Associates, Ltd. 117 Bellevue Ave Newport, RI 02840	legal fees placed in escrow	06/28/17	\$5,000.00

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

Debtor **241 Main Street, Inc.**

Case number (if known)

15. Health Care bankruptcies

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

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

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

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

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

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

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

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

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- None

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

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

- None

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

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

- None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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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

Debtor 241 Main Street, Inc.

Case number (if known) _____

leased or rented property.

None

Part 12: Details About Environment Information

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

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

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

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

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

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

No.
 Yes. Provide details below.

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

No.
 Yes. Provide details below.

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

No.
 Yes. Provide details below.

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

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

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

None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
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26. Books, records, and financial statements

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

None

Name and address	Date of service From-To
26a.1. Cindy Padula 254 Old Forge Rd East Greenwich, RI 02818-4607	09/16 to present

Debtor **241 Main Street, Inc.**

Name and address		Date of service From-To
26a.2.	Wayne Wilfand 1150 New London Ave Cranston, RI 02920-3036	2013 to present
26a.3.	Tammy Lee Wilson	2007-2015
26a.4.	Carol Plante	2015-2016

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

Name and address		Date of service From-To
26b.1.	Cindy Padula 254 Old Forge Rd East Greenwich, RI 02818-4607	09/16 to present
26b.2.	Wayne Wilfand 1150 New London Ave Cranston, RI 02920-3036	2013 to present
26b.3.	Tammy Lee Wilson	2007-2015
26b.4.	Carol Plante	2015-2016

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

None

Name and address		If any books of account and records are unavailable, explain why
26c.1.	Cindy Padula 254 Old Forge Rd East Greenwich, RI 02818-4607	
26c.2.	Wayne Wilfand 1150 New London Ave Cranston, RI 02920-3036	
26c.3.	Peter M. Iascone & Associates, Ltd. 117 Bellevue Ave Newport, RI 02840-7439	

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

Debtor **241 Main Street, Inc.**

Case number (if known)

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
27.1	Scott Parker	12/31/16	14,884.00

Name and address of the person who has possession of inventory records

241 Main Street, LLC
254 Old Forge Rd
East Greenwich, RI 02818-4607

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Member	100

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
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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
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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
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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

Debtor 241 Main Street, Inc.

Case number (if known) _____

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 August 9, 2017

/s/ Scott Parker

Scott Parker

Signature of individual signing on behalf of the debtor

Printed name

Position or relationship to debtor Manager

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

No

Yes

Fill in this information to identify your case:

United States Bankruptcy Court for the:
 DISTRICT OF RHODE ISLAND, PROVIDENCE DIVISION

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 241 Main Street, Inc.

2. All other names debtor used in the last 8 years
 Include any assumed names, trade names and doing business as names
DBA Fat Bellys Irish Pub and Grille

3. Debtor's federal Employer Identification Number (EIN) 94-3456371

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>241 Main St</u> <u>East Greenwich, RI 02818-3742</u> <small>Number, Street, City, State & ZIP Code</small>	_____ <small>P.O. Box, Number, Street, City, State & ZIP Code</small>
	<u>Kent</u> <small>County</small>	Location of principal assets, if different from principal place of business <u>241 Main St East Greenwich, RI 02818-3742</u> <small>Number, Street, City, State & ZIP Code</small>

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 241 Main Street, 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>.

7225

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 241 Main Street, Inc. Case number (if known) _____
 Name

11. Why is the case filed in this district? *Check all that apply:*
- Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
 - A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?
- No
 - Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention? (Check all that apply.)**
- It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
 What is the hazard? _____
 - It needs to be physically secured or protected from the weather.
 - It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
 - Other _____
- Where is the property?** _____
 Number, Street, City, State & ZIP Code
- Is the property insured?**
- No
 - Yes. Insurance agency _____
 Contact name _____
 Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds *Check one:*
- Funds will be available for distribution to unsecured creditors.
 - After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input checked="" type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor **241 Main Street, 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 **August 9, 2017**
MM / DD / YYYY

X **/s/ Scott Parker**
Signature of authorized representative of debtor

Title **Manager**

Scott Parker
Printed name

18. Signature of attorney

X **/s/ Peter M. Iascone**
Signature of attorney for debtor

Date **August 9, 2017**
MM / DD / YYYY

Peter M. Iascone
Printed name

Peter M. Iascone & Associates, Ltd.
Firm name

**117 Bellevue Ave
Newport, RI 02840**
Number, Street, City, State & ZIP Code

Contact phone **(401) 848-5200** Email address **piascone@aol.com**

3125
Bar number and State

Fill in this information to identify the case:

Debtor name 241 Main Street, Inc.

United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND, PROVIDENCE DIVISION

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 August 9, 2017

X /s/ Scott Parker
Signature of individual signing on behalf of debtor

Scott Parker
Printed name

Manager
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name 241 Main Street, Inc.
 United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND, PROVIDENCE DIVISION
 Case number (if known): _____

Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Scott Parker 354 Old Forge Rd East Greenwich, RI 02818-4616		Money Loaned				\$122,197.00
Perkins Paper 640 John Hancock Rd Taunton, MA 02780-7902		Trade debt				\$14,789.82
Shiv EG LLC c/o Orange Leaf Yogurt 1000 Bald Hill Rd Ste 2 Warwick, RI 02886-0794		Rent & water/sewer				\$11,230.84
Providence Beverage PO Box 1437 Coventry, RI 02816-0026		Trade debt				\$8,144.65
Rhode Island Distributing Company, LLC 119 Hopkins Hill Rd West Greenwich, RI 02817-1709		Trade debt				\$8,144.65
Sinel, Wilfand & Vinci 1150 New London Ave Cranston, RI 02920-3036		Professional Fees				\$7,238.00

Debtor **241 Main Street, 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, and government)	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
National Grid LNG LLC 280 Melrose St Providence, RI 02907-2152		Utilities				\$5,791.27
SESAC 1900 Broadway New York, NY 10023-7004		Trade debt				\$4,568.94
National Grid LNG LLC 280 Melrose St Providence, RI 02907-2152		Utilities				\$1,831.13
Beacon Mutual PO Box 416142 Boston, MA 02241-6142		Insurance				\$1,257.00
NuCo2 PO Box 417902 Boston, MA 02241-7902		Trade debt				\$890.15
Oracle America PO Box 203448 Dallas, TX 75320-3448		Trade debt				\$600.00
Cranston Welding Supply Co. 1425 Park Ave Cranston, RI 02920-6628		Trade debt				\$520.20
ASCAP 1900 Broadway New York, NY 10023-7004		Trade debt				\$492.34
DIRECTV, LLC 2260 E Imperial Hwy El Segundo, CA 90245-3501		Utilities				\$490.56
Quality Mechanical Services Inc. 52 Widow Sweets Rd Exeter, RI 02822-2712		Trade debt				\$345.56
Top This Pizza Crusts, Inc. 24 Corliss St # 6044 Providence, RI 02940-7703		Trade debt				\$330.00

Debtor 241 Main Street, 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, and government)	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
Ecolab, Inc. 121 Ecolab Pl St Paul, MN 55102		Trade debt				\$221.37
Verizon Business Network Services Inc. 1 Verizon Way Basking Ridge, NJ 07920-1025		Utilities				\$174.23
National Grid LNG LLC 280 Melrose St Providence, RI 02907-2152		Utilities				\$169.47

Debtor 241 Main Street, Inc. Case number (If known) _____
Name

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

<u>\$1,026.64</u>

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.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies Furniture, Fixtures and Equipment (balance sheet lists much higher number, difference appears to be leasehold improvements put in over 5 years ago. Unknown liquidated value.		\$12,000.00		\$12,000.00

23. **Total of Part 5.**
 Add lines 19 through 22. Copy the total to line 84.

<u>\$12,000.00</u>

24. Is any of the property listed in Part 5 perishable?

- No
- Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- No
- Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- No
- Yes

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

Debtor 241 Main Street, Inc. Case number (If known) _____
 Name

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.
- 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.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 241 Main St, East Greenwich, RI 02818-3742 lease of business premises-no ownership by Debtor		\$0.00		unknown

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- No
- Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- No
- Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- No. Go to Part 11.
- Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	---	---	------------------------------------

60. Patents, copyrights, trademarks, and trade secrets

61. Internet domain names and websites

Debtor 241 Main Street, Inc. Case number (If known) _____
 Name

62. **Licenses, franchises, and royalties**
Liquor License-no equitable value East
Greenwich License \$0.00 \$0.00

63. **Customer lists, mailing lists, or other compilations**

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.** \$0.00
 Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?
 No
 Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**
 No
 Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**
 No
 Yes

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.

Current value of debtor's interest

71. **Notes receivable**
 Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**
 Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*
Intangible assets net per most recent tax return (net of amortization) \$1,240.00

Merchandise inventory (estimated) \$14,884.80

Debtor 241 Main Street, Inc.
Name

Case number (if known) _____

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

<u>\$16,124.80</u>

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- No
- Yes

Debtor 241 Main Street, 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. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$4,716.82</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$1,026.64</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$12,000.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$16,124.80</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$33,868.26</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$33,868.26</u>

Fill in this information to identify the case:

Debtor name 241 Main Street, Inc.

United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND, PROVIDENCE DIVISION

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.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A	Column B
		Amount of claim	Value of collateral that supports this claim
		Do not deduct the value of collateral.	
<p>2.1</p> <p>Nextwave Enterprises, LLC</p> <p>Creditor's Name</p> <p>5757 Blue Lagoon Dr Miami, FL 33126-2058</p> <p>Creditor's mailing address</p> <p>_____ Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p> <p>1. Rewards Network Establishment Services</p> <p>2. Nextwave Enterprises, LLC</p> <p>3. Vend Lease Company</p>	<p>Describe debtor's property that is subject to a lien</p> <p>Cash on hand on petition date</p> <p>_____</p> <p>Describe the lien</p> <p>Money Loaned</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$82,000.00</p>	<p>\$5,743.46</p>
<p>2.2</p> <p>Rewards Network Establishment Services</p> <p>Creditor's Name</p> <p>2 N Riverside Plz Lbby Chicago, IL 60606-2600</p> <p>Creditor's mailing address</p> <p>_____ Creditor's email address, if known</p> <p>Date debt was incurred</p>	<p>Describe debtor's property that is subject to a lien</p> <p>Cash on hand on petition date</p> <p>_____</p> <p>Describe the lien</p> <p>Money Loaned</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p>	<p>\$156,282.56</p>	<p>\$5,743.46</p>

Debtor 241 Main Street, Inc. Case number (if known) _____
Name

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

1. Rewards Network Establishment Services
2. Nextwave Enterprises, LLC
3. Vend Lease Company

As of the petition filing date, the claim is:

Check all that apply

- Contingent
 Unliquidated
 Disputed

2.3 Sysco Boston, LLC

Creditor's Name

1390 Enclave Pkwy
Houston, TX 77077-2025

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

3458

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

1. Sysco Boston, LLC
2. Vend Lease Company

Describe debtor's property that is subject to a lien

Furniture, Fixtures and Equipment (balance sheet lists much higher number, difference appears to be leasehold improvements put in over 5 years ago. Unknown liquidated value.

\$6,527.84

\$12,000.00

Describe the lien

Trade Debt

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
 Unliquidated
 Disputed

2.4 Vend Lease Company

Creditor's Name

8100 Sandpiper Cir
Baltimore, MD 21236-4991

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

Cash on hand on petition date

unknown

\$17,743.46

Describe the lien

Trade Debt

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Debtor 241 Main Street, Inc. Case number (if known) _____
Name

- No Contingent
 Yes. Specify each creditor, including this creditor and its relative priority. Unliquidated
 Disputed

1. Rewards Network Establishment Services
2. Nextwave Enterprises, LLC
3. Vend Lease Company
4. Sysco Boston, LLC

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$244,810.40**

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
Corporate Service Company 222 Jefferson Blvd Ste 200 Warwick, RI 02888-3855	Line <u>2.3</u>	3458
Craig L. Friedrichs, Esquire Quarles & Brady LLP 2 N Central Ave Phoenix, AZ 85004-2322	Line <u>2.2</u>	
Nicole H. Daniel, Esquire Dinsmore & Shohl, LLP 227 W Monroe St Ste 3850 Chicago, IL 60606-5085	Line <u>2.2</u>	
Patricia Antonelli, Esquire Partridge, Snow & Hahn 40 Westminster St Ste 1100 Providence, RI 02903-2527	Line <u>2.1</u>	

Fill in this information to identify the case:

Debtor name 241 Main Street, Inc.

United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND, PROVIDENCE DIVISION

Case number (if known) _____

Check if this is an amended filing

Official Form 206E/F
Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.

Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
<p>2.1</p> <p>Priority creditor's name and mailing address</p> <p>Division Of Taxation Sales Tax Division 1 Capitol HI Providence, RI 02908-5816</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Sales Tax</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$8,862.62</p>	<p>\$0.00</p>
<p>2.2</p> <p>Priority creditor's name and mailing address</p> <p>Kent County Water Authority</p> <p>1072 Main St West Warwick, RI 02893-3746</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Utilities</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$559.40</p>	<p>\$519.13</p>

Debtor 241 Main Street, Inc. Case number (if known) _____
 Name _____

2.3	Priority creditor's name and mailing address Town of East Greenwich PO Box 150436 Hartford, CT 06115-0436	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,272.50 \$1,272.50
Date or dates debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2.4	Priority creditor's name and mailing address Town of East Greenwich PO Box 150436 Hartford, CT 06115-0436	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	unknown \$0.00
Date or dates debt was incurred _____		Basis for the claim: Taxes	
Last 4 digits of account number 1840		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address AJK Draft Line Cleaning 55 Alger Ave Warwick, RI 02886 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width:100%; background-color: #f2f2f2;"> <tr> <td style="text-align: center;">Amount of claim</td> </tr> <tr> <td style="text-align: center;">\$75.00</td> </tr> </table>	Amount of claim	\$75.00
Amount of claim					
\$75.00					

3.2	Nonpriority creditor's name and mailing address Ameripride Services, Inc. 10801 Wayzata Blvd Minnetonka, MN 55305-5510 Date(s) debt was incurred _____ Last 4 digits of account number 1704	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$136.24
-----	--	--	-----------------

3.3	Nonpriority creditor's name and mailing address ASCAP 1900 Broadway New York, NY 10023-7004 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$492.34
-----	---	--	-----------------

Debtor 241 Main Street, Inc. Case number (if known) _____
Name

3.4 Nonpriority creditor's name and mailing address **B.M. Rubbish Services Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$150.00
 PO Box 814
 North Kingstown, RI 02852-0607
 Date(s) debt was incurred _____
 Last 4 digits of account number 467
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.5 Nonpriority creditor's name and mailing address **Beacon Mutual** As of the petition filing date, the claim is: *Check all that apply.* \$1,257.00
 PO Box 416142
 Boston, MA 02241-6142
 Date(s) debt was incurred _____
 Last 4 digits of account number 1004
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Insurance
 Is the claim subject to offset? No Yes

3.6 Nonpriority creditor's name and mailing address **BMI** As of the petition filing date, the claim is: *Check all that apply.* unknown
 PO Box 406741
 Atlanta, GA 30384-6741
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: trade debt
 Is the claim subject to offset? No Yes

3.7 Nonpriority creditor's name and mailing address **Calise & Sons Bakery, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$74.00
 2 Quality Dr
 Lincoln, RI 02865-4266
 Date(s) debt was incurred _____
 Last 4 digits of account number F412
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.8 Nonpriority creditor's name and mailing address **Citizens Bank** As of the petition filing date, the claim is: *Check all that apply.* unknown
 PO Box 42014
 Providence, RI 02940-2014
 Date(s) debt was incurred _____
 Last 4 digits of account number 0026
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.9 Nonpriority creditor's name and mailing address **Cranston Welding Supply Co.** As of the petition filing date, the claim is: *Check all that apply.* \$520.20
 1425 Park Ave
 Cranston, RI 02920-6628
 Date(s) debt was incurred _____
 Last 4 digits of account number BE10
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.10 Nonpriority creditor's name and mailing address **DIRECTV, LLC** As of the petition filing date, the claim is: *Check all that apply.* \$490.56
 2260 E Imperial Hwy
 El Segundo, CA 90245-3501
 Date(s) debt was incurred _____
 Last 4 digits of account number 5592
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Utilities
 Is the claim subject to offset? No Yes

Debtor 241 Main Street, Inc. Case number (if known) _____
Name

3.11 Nonpriority creditor's name and mailing address **Ecolab, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$221.37
 121 Ecolab PI
 St Paul, MN 55102
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.12 Nonpriority creditor's name and mailing address **Gordon Food Service, Inc.** As of the petition filing date, the claim is: *Check all that apply.* unknown
 PO Box 1787
 Grand Rapids, MI 49501-1787
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.13 Nonpriority creditor's name and mailing address **Integrity Cleaning** As of the petition filing date, the claim is: *Check all that apply.* unknown
 9 Rosemont Ter
 Providence, RI 02911-3125
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.14 Nonpriority creditor's name and mailing address **M.S. Walker of Rhode Island, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$56.90
 16 Commercial Way
 Warren, RI 02885-1637
 Date(s) debt was incurred _____
 Last 4 digits of account number 3768
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.15 Nonpriority creditor's name and mailing address **Market Grinding, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$44.00
 201 W Grove St
 Middleboro, MA 02346-1472
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.16 Nonpriority creditor's name and mailing address **National Grid LNG LLC** As of the petition filing date, the claim is: *Check all that apply.* \$1,831.13
 280 Melrose St
 Providence, RI 02907-2152
 Date(s) debt was incurred _____
 Last 4 digits of account number 3005
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Utilities
 Is the claim subject to offset? No Yes

3.17 Nonpriority creditor's name and mailing address **National Grid LNG LLC** As of the petition filing date, the claim is: *Check all that apply.* \$5,791.27
 280 Melrose St
 Providence, RI 02907-2152
 Date(s) debt was incurred _____
 Last 4 digits of account number 1026
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Utilities
 Is the claim subject to offset? No Yes

Debtor 241 Main Street, Inc. Case number (if known) _____
Name

3.18 Nonpriority creditor's name and mailing address **National Grid LNG LLC** As of the petition filing date, the claim is: *Check all that apply.* \$169.47
 280 Melrose St
 Providence, RI 02907-2152
 Date(s) debt was incurred _____
 Last 4 digits of account number 7025
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Utilities
 Is the claim subject to offset? No Yes

3.19 Nonpriority creditor's name and mailing address **National Refrigeration, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$114.00
 3600 W Shore Rd
 Warwick, RI 02886-5038
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.20 Nonpriority creditor's name and mailing address **New England Control Tech, Inc.** As of the petition filing date, the claim is: *Check all that apply.* unknown
 105 Cowesett Ave
 West Warwick, RI 02893-3228
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.21 Nonpriority creditor's name and mailing address **NuCo2** As of the petition filing date, the claim is: *Check all that apply.* \$890.15
 PO Box 417902
 Boston, MA 02241-7902
 Date(s) debt was incurred _____
 Last 4 digits of account number 8590
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.22 Nonpriority creditor's name and mailing address **Oracle America** As of the petition filing date, the claim is: *Check all that apply.* \$600.00
 PO Box 203448
 Dallas, TX 75320-3448
 Date(s) debt was incurred _____
 Last 4 digits of account number 3050
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.23 Nonpriority creditor's name and mailing address **Perkins Paper** As of the petition filing date, the claim is: *Check all that apply.* \$14,789.82
 640 John Hancock Rd
 Taunton, MA 02780-7902
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.24 Nonpriority creditor's name and mailing address **Providence Beverage** As of the petition filing date, the claim is: *Check all that apply.* \$8,144.65
 PO Box 1437
 Coventry, RI 02816-0026
 Date(s) debt was incurred _____
 Last 4 digits of account number 1725
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

Debtor 241 Main Street, Inc. Case number (if known) _____
Name

3.25 Nonpriority creditor's name and mailing address **Quality Mechanical Services Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$345.56
 52 Widow Sweets Rd
 Exeter, RI 02822-2712
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.26 Nonpriority creditor's name and mailing address **Reagan Plumbing & Health** As of the petition filing date, the claim is: *Check all that apply.* unknown
 235 Georgia Ave
 Providence, RI 02905-4516
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.27 Nonpriority creditor's name and mailing address **Rhode Island Distributing Company, LLC** As of the petition filing date, the claim is: *Check all that apply.* \$8,144.65
 119 Hopkins Hill Rd
 West Greenwich, RI 02817-1709
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.28 Nonpriority creditor's name and mailing address **Scott Parker** As of the petition filing date, the claim is: *Check all that apply.* \$122,197.00
 354 Old Forge Rd
 East Greenwich, RI 02818-4616
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: money loaned
 Is the claim subject to offset? No Yes

3.29 Nonpriority creditor's name and mailing address **SESAC** As of the petition filing date, the claim is: *Check all that apply.* \$4,568.94
 1900 Broadway
 New York, NY 10023-7004
 Date(s) debt was incurred _____
 Last 4 digits of account number 1624
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Trade Debt
 Is the claim subject to offset? No Yes

3.30 Nonpriority creditor's name and mailing address **Shiv EG LLC** As of the petition filing date, the claim is: *Check all that apply.* \$11,230.84
 c/o Orange Leaf Yoguart
 1000 Bald Hill Rd Ste 2
 Warwick, RI 02886-0794
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Rent
 Is the claim subject to offset? No Yes

3.31 Nonpriority creditor's name and mailing address **Sinel, Wilfand & Vinci** As of the petition filing date, the claim is: *Check all that apply.* \$7,238.00
 1150 New London Ave
 Cranston, RI 02920-3036
 Date(s) debt was incurred _____
 Last 4 digits of account number 0001
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Professional Fees
 Is the claim subject to offset? No Yes

Debtor 241 Main Street, Inc. Case number (if known) _____
Name

3.32	Nonpriority creditor's name and mailing address Team Trivia N.E., LLC 225 Calvin St Fall River, MA 02720-4332 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	unknown
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3.33	Nonpriority creditor's name and mailing address The Hartford PO Box 2907 Hartford, CT 06104-2907 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	unknown
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3.34	Nonpriority creditor's name and mailing address Top This Pizza Crusts, Inc. 24 Corliss St # 6044 Providence, RI 02940-7703 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$330.00
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3.35	Nonpriority creditor's name and mailing address Total Beverage System 137 Hansen Rd Norwich, CT 06360-9402 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	unknown
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3.36	Nonpriority creditor's name and mailing address Verizon Business Network Services Inc. 1 Verizon Way Basking Ridge, NJ 07920-1025 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$174.23
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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 Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Ameripride Services, Inc. PO Box 1390 Bemidji, MN 56619-1390	Line <u>3.2</u> <input type="checkbox"/> Not listed. Explain _____	<u>1704</u>
4.2	ASCAP 2675 Paces Ferry Rd SE Ste 350 Atlanta, GA 30339-4087	Line <u>3.3</u> <input type="checkbox"/> Not listed. Explain _____	—

Debtor	Name	Case number (if known)	
	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
4.3	Corporation Service Company 222 Jefferson Blvd Ste 200 Warwick, RI 02888-3855	Line <u>3.23</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	Corporation Service Company 222 Jefferson Blvd Ste 200 Warwick, RI 02888-3855	Line <u>3.16</u> <input type="checkbox"/> Not listed. Explain _____	<u>3005</u>
4.5	Corporation Service Company 222 Jefferson Blvd Ste 200 Warwick, RI 02888-3855	Line <u>3.17</u> <input type="checkbox"/> Not listed. Explain _____	<u>1026</u>
4.6	Corporation Service Company 222 Jefferson Blvd Ste 200 Warwick, RI 02888-3855	Line <u>3.18</u> <input type="checkbox"/> Not listed. Explain _____	<u>7025</u>
4.7	CT Corporation System 450 Veterans Memorial Pkwy Ste 7A East Providence, RI 02914-5315	Line <u>3.10</u> <input type="checkbox"/> Not listed. Explain _____	<u>5592</u>
4.8	CT Corporation System 450 Veterans Memorial Pkwy Ste 7A East Providence, RI 02914-5315	Line <u>3.11</u> <input type="checkbox"/> Not listed. Explain _____	—
4.9	CT Corporation System 450 Veterans Memorial Pkwy Ste 7A East Providence, RI 02914-5315	Line <u>3.36</u> <input type="checkbox"/> Not listed. Explain _____	—
4.10	CT Corporation System 450 Veterans Memorial Pkwy Ste 7A East Providence, RI 02914-5315	Line <u>3.2</u> <input type="checkbox"/> Not listed. Explain _____	<u>1704</u>
4.11	E. Colby Cameron, Esquire 301 Promenade St Providence, RI 02908-5720	Line <u>3.31</u> <input type="checkbox"/> Not listed. Explain _____	<u>0001</u>
4.12	Lynda L Laing Esq. 1 Davol Sq Ste 305 Providence, RI 02903-4755	Line <u>3.12</u> <input type="checkbox"/> Not listed. Explain _____	—
4.13	Michael R. Calise 2 Quality Dr Lincoln, RI 02865-4266	Line <u>3.7</u> <input type="checkbox"/> Not listed. Explain _____	<u>F412</u>
4.14	Michael S. Kiernan, Esquire 91 Friendship St Providence, RI 02903-3837	Line <u>3.4</u> <input type="checkbox"/> Not listed. Explain _____	<u>467</u>
4.15	Michael W. Sweeney, Esquire 1 Financial Plz Ste 1800 Providence, RI 02903-2419	Line <u>3.14</u> <input type="checkbox"/> Not listed. Explain _____	<u>3768</u>

Debtor	<u>241 Main Street, Inc.</u> Name	Case number (if known)	
	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	
4.16	Myles Lineberry 52 Widow Sweets Rd Exeter, RI 02822-2712	Line <u>3.25</u> <input type="checkbox"/> Not listed. Explain _____	—
4.17	Patrick A. Rogers, Esquire 100 Westminster St Ste 1500 Providence, RI 02903-2395	Line <u>3.27</u> <input type="checkbox"/> Not listed. Explain _____	—
4.18	Richard E. Fleury, Esquire 33 College Hill Rd Ste 20F Warwick, RI 02886-2746	Line <u>3.19</u> <input type="checkbox"/> Not listed. Explain _____	—
4.19	William T. Heaton 1425 Park Ave Cranston, RI 02920-6628	Line <u>3.9</u> <input type="checkbox"/> Not listed. Explain _____	<u>BE10</u>

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

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

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

	Total of claim amounts
5a.	\$ <u>10,694.52</u>
5b. +	\$ <u>190,077.32</u>
5c.	\$ <u>200,771.84</u>

Fill in this information to identify the case:

Debtor name 241 Main Street, Inc.

United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND, PROVIDENCE DIVISION

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 **Rental Lease**

State the term remaining 11/30/18

List the contract number of any government contract _____

SHIV E.G. LLC
c/o Orange Leaf Yogurt
1000 Bald Hill Rd Ste 2
Warwick, RI 02886-0794

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

State the term remaining _____

List the contract number of any government contract _____

Vend Lease Company
8100 Sandpiper Cir
Baltimore, MD 21236-4991

Fill in this information to identify the case:

Debtor name 241 Main Street, Inc.

United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND, PROVIDENCE DIVISION

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 Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	AJK Draft Line Cleaning	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.1</u> <input type="checkbox"/> G _____
2.2 Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Ameripride Services, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____
2.3 Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	ASCAP	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.3</u> <input type="checkbox"/> G _____
2.4 Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	B.M. Rubbish Services Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.4</u> <input type="checkbox"/> G _____
2.5 Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Calise & Sons Bakery, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
2.6 Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Cranston Welding Supply Co.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.9</u> <input type="checkbox"/> G _____

Debtor **241 Main Street, Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.7	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Ecolab, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
2.8	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Gordon Food Service, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.12</u> <input type="checkbox"/> G _____
2.9	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Kent County Water Authority	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.2</u> <input type="checkbox"/> G _____
2.10	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	M.S. Walker of Rhode Island, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.14</u> <input type="checkbox"/> G _____
2.11	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Market Grinding, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.15</u> <input type="checkbox"/> G _____
2.12	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Nextwave Enterprises, LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.13	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Perkins Paper	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.23</u> <input type="checkbox"/> G _____
2.14	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Rewards Network Establishment Services	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.15	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Rhode Island Distributing Company, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.27</u> <input type="checkbox"/> G _____

Debtor **241 Main Street, Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.16	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	SESAC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.29</u> <input type="checkbox"/> G _____
2.17	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Shiv EG LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.30</u> <input type="checkbox"/> G _____
2.18	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Sysco Boston, LLC	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.19	Scott Parker	354 Old Forge Rd East Greenwich, RI 02818-4616	Vend Lease Company	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.20	Scott Parker		SHIV E.G. LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
2.21	Scott Parker	254 Old Forge Road East Greenwich, RI 0	Vend Lease Company	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>

Fill in this information to identify the case:

Debtor name 241 Main Street, Inc.

United States Bankruptcy Court for the: DISTRICT OF RHODE ISLAND, PROVIDENCE DIVISION

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. <i>Schedule A/B: Assets-Real and Personal Property</i> (Official Form 206A/B)	
1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>33,868.26</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>33,868.26</u>

Part 2: Summary of Liabilities

2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 206D) Copy the total dollar amount listed in Column A Amount of claim, from line 3 of <i>Schedule D</i>		\$ <u>244,810.40</u>
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 206E/F)		
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>10,694.52</u>	
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>190,077.32</u>	
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>445,582.24</u>	

United States Bankruptcy Court
District of Rhode Island, Providence Division

In re 241 Main Street, Inc.

Debtor(s)

Case No.

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

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:

FLAT FEE

For legal services, I have agreed to accept \$
Prior to the filing of this statement I have received \$
Balance Due \$

RETAINER

For legal services, I have agreed to accept and received a retainer of \$ 5,000.00
The undersigned shall bill against the retainer at an hourly rate of \$ 300.00
[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

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

Debtor Other (specify):

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

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other 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.

5. 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]

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

Filing Fee of \$1,717.00

In re 241 Main Street, Inc.

Case No. _____

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
(Continuation Sheet)

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.

August 9, 2017

Date

/s/ Peter M. Iascone

Peter M. Iascone

Signature of Attorney

Peter M. Iascone & Associates, Ltd.

117 Bellevue Ave

Newport, RI 02840

(401) 848-5200 Fax: (401) 846-8189

piascone@aol.com

Name of law firm