

B1 (Official Form 1)(4/10)

<b>United States Bankruptcy Court</b> <b>District of South Carolina</b>		<b>Voluntary Petition</b>																														
Name of Debtor (if individual, enter Last, First, Middle): <b>Om Shivai Inc.</b>		Name of Joint Debtor (Spouse) (Last, First, Middle):																														
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																														
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) <b>58-2450394</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)																														
Street Address of Debtor (No. and Street, City, and State): <b>3217 Lancaster Hwy. Richburg, SC</b> <div style="text-align: right; font-size: small;">ZIP Code <b>29729</b></div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right; font-size: small;">ZIP Code</div>																														
County of Residence or of the Principal Place of Business: <b>Chester</b>		County of Residence or of the Principal Place of Business:																														
Mailing Address of Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>																														
Location of Principal Assets of Business Debtor (if different from street address above): <b>3217 Lancaster Hwy. Richburg, SC 29729</b>																																
<b>Type of Debtor</b> (Form of Organization) (Check one box)  <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<b>Nature of Business</b> (Check one box)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other  <b>Tax-Exempt Entity</b> (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)  <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  <b>Nature of Debts</b> (Check one box)  <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.																														
<b>Filing Fee</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Chapter 11 Debtors</b> Check one box: <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 ( <i>amount subject to adjustment on 4/01/13 and every three years thereafter</i> ). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																														
<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.  <b>Estimated Number of Creditors</b> <table style="width: 100%; font-size: small;"> <tr> <td><input checked="" type="checkbox"/> 1-49</td> <td><input type="checkbox"/> 50-99</td> <td><input type="checkbox"/> 100-199</td> <td><input type="checkbox"/> 200-999</td> <td><input type="checkbox"/> 1,000-5,000</td> <td><input type="checkbox"/> 5,001-10,000</td> <td><input type="checkbox"/> 10,001-25,000</td> <td><input type="checkbox"/> 25,001-50,000</td> <td><input type="checkbox"/> 50,001-100,000</td> <td><input type="checkbox"/> OVER 100,000</td> </tr> </table> <b>Estimated Assets</b> <table style="width: 100%; font-size: small;"> <tr> <td><input type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input checked="" type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table> <b>Estimated Liabilities</b> <table style="width: 100%; font-size: small;"> <tr> <td><input type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input checked="" type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table>		<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> OVER 100,000	<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion	<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input checked="" type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion	THIS SPACE IS FOR COURT USE ONLY
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# **Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

**Om Shivai Inc.**

## **All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **- None -**

Case Number:

Date Filed:

Location

Where Filed:

Case Number:

Date Filed:

## **Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor:

Case Number:

Date Filed:

**- None -**

District:

Relationship:

Judge:

### **Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

### **Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

**X**

Signature of Attorney for Debtor(s)

(Date)

### **Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

### **Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

### **Information Regarding the Debtor - Venue**

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, 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.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

### **Certification by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)

\_\_\_\_\_  
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

# Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

**Om Shivai Inc.**

## Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.  
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** \_\_\_\_\_  
Signature of Debtor

**X** \_\_\_\_\_  
Signature of Joint Debtor

\_\_\_\_\_  
Telephone Number (If not represented by attorney)

\_\_\_\_\_  
Date

### Signature of Attorney\*

**X** /s/ L.SHOWELL BLADES IV  
Signature of Attorney for Debtor(s)

L.SHOWELL BLADES IV 5059  
Printed Name of Attorney for Debtor(s)

L. Showell Blades IV  
Firm Name

**P.O. Box 10671**  
**142 Oakland Avenue, Suite C**  
**Rock Hill, SC 29731**

\_\_\_\_\_  
Address

**Email: showell@showellblades.com**  
**803-329-6115 Fax: 803-329-6544**

\_\_\_\_\_  
Telephone Number

**June 29, 2010**

\_\_\_\_\_  
Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ Varsha Desai  
Signature of Authorized Individual

**Varsha Desai**

\_\_\_\_\_  
Printed Name of Authorized Individual

**President**

\_\_\_\_\_  
Title of Authorized Individual

**June 29, 2010**

\_\_\_\_\_  
Date

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X** \_\_\_\_\_  
Signature of Foreign Representative

\_\_\_\_\_  
Printed Name of Foreign Representative

\_\_\_\_\_  
Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

\_\_\_\_\_  
Printed Name and title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

\_\_\_\_\_  
Address

**X** \_\_\_\_\_

\_\_\_\_\_  
Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.*

B4 (Official Form 4) (12/07)

**United States Bankruptcy Court  
District of South Carolina**

In re **Om Shivai Inc.**

Debtor(s)

Case No.

Chapter **11**

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
<b>Allied Waste Services Po Box 219 Pineville, NC 28134-0219</b>	<b>Allied Waste Services Po Box 219 Pineville, NC 28134-0219</b>	<b>Services</b>		<b>Unknown</b>
<b>Central Equipment Company Inc Po Box 288 Columbia, SC 29202</b>	<b>Central Equipment Company Inc Po Box 288 Columbia, SC 29202</b>	<b>Services</b>		<b>403.41</b>
<b>Chester County Tax Collector PO Box 580 Chester, SC 29706</b>	<b>Chester County Tax Collector PO Box 580 Chester, SC 29706</b>	<b>Days Inn/Richburg motel located at 3217 Lancaster Hwy., Richburg, SC 29729. See tax statement attached. Tax map No. 124-00-00-073-000. Value is based</b>		<b>53,000.00 (500,000.00 secured) (1,084,385.68 senior lien)</b>
<b>Chriag Desai 350 Parsippany Road Apt 80 Parsippany, NJ 07054</b>	<b>Chriag Desai 350 Parsippany Road Apt 80 Parsippany, NJ 07054</b>	<b>Loan</b>		<b>10,000.00</b>
<b>Courtesy Products LLC Po Box 17488 Saint Louis, MO 63178-7488</b>	<b>Courtesy Products LLC Po Box 17488 Saint Louis, MO 63178-7488</b>	<b>Services</b>		<b>Unknown</b>
<b>EcoLab Po Box 905327 Charlotte, NC 28290-5327</b>	<b>EcoLab Po Box 905327 Charlotte, NC 28290-5327</b>	<b>Services</b>		<b>Unknown</b>
<b>First Citizens Bank Po Box 29 Columbia, SC 29202</b>	<b>First Citizens Bank Po Box 29 Columbia, SC 29202</b>	<b>Days Inn/Richburg motel located at 3217 Lancaster Hwy., Richburg, SC 29729. See tax statement attached. Tax map No. 124-00-00-073-000. Value is based</b>		<b>1,083,585.68 (500,000.00 secured)</b>

B4 (Official Form 4) (12/07) - Cont.

In re **Om Shivai Inc.**

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

Debtor(s) \_\_\_\_\_

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
HD Supply Po Box 509058 San Diego, CA 92150	HD Supply Po Box 509058 San Diego, CA 92150	Services		Unknown
Himanshu Desai 5161 Hwy 27 E Iron Station, NC 28080	Himanshu Desai 5161 Hwy 27 E Iron Station, NC 28080	Loan		5,000.00
Kalpesh Patel 64 Rieder Road Edison, NJ 08817	Kalpesh Patel 64 Rieder Road Edison, NJ 08817	Loan		7,500.00
Market America Po Box 7219 Rainbow City, AL 35906	Market America Po Box 7219 Rainbow City, AL 35906	Services		Unknown
Nilesh Desai 289 Hampshire Court Piscataway, NJ 08854	Nilesh Desai 289 Hampshire Court Piscataway, NJ 08854	Loan		10,000.00
Quill Corporation Po Box 37600 Philadelphia, PA 19101	Quill Corporation Po Box 37600 Philadelphia, PA 19101	Services		Unknown
S Puri 1913-204 J.N. Pease Place University Ridge Office Center Charlotte, NC 28262	S Puri 1913-204 J.N. Pease Place University Ridge Office Center Charlotte, NC 28262	Services		5,600.00
Sameep Inc 2 Bloomfield Avenue Belleville, NJ 07109	Sameep Inc 2 Bloomfield Avenue Belleville, NJ 07109	Loan		36,000.00
Sangita Patel 622 Grove Avenue Edison, NJ 08820	Sangita Patel 622 Grove Avenue Edison, NJ 08820	Loan		10,000.00
SC Department of Revenue & Taxation PO Box 125 Columbia, SC 29214	SC Department of Revenue & Taxation PO Box 125 Columbia, SC 29214	Days Inn/Richburg motel located at 3217 Lancaster Hwy., Richburg, SC 29729. See tax statement attached. Tax map No. 124-00-00-073-000. Value is based		800.00 (500,000.00 secured) (1,083,585.68 senior lien)
Southern Hospitality Supply 10709-K Granite Street Charlotte, NC 28273	Southern Hospitality Supply 10709-K Granite Street Charlotte, NC 28273	Services		Unknown
USA Today 305 Seabord Lane Suite 301 Franklin, TN 37067-8288	USA Today 305 Seabord Lane Suite 301 Franklin, TN 37067-8288	Services		Unknown

B4 (Official Form 4) (12/07) - Cont.

In re **Om Shivai Inc.**

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

Debtor(s)

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>

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

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

Date **June 29, 2010**

Signature **/s/ Varsha Desai**

**Varsha Desai**  
**President**

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

ALLIED WASTE SERVICES  
PO BOX 219  
PINEVILLE NC 28134-0219

CENTRAL EQUIPMENT COMPANY INC  
PO BOX 288  
COLUMBIA SC 29202

CHESTER COUNTY TAX COLLECTOR  
PO BOX 580  
CHESTER SC 29706

CHRIAG DESAI  
350 PARSIPPANY ROAD  
APT 80  
PARSIPPANY NJ 07054

COURTESY PRODUCTS LLC  
PO BOX 17488  
SAINT LOUIS MO 63178-7488

ECOLAB  
PO BOX 905327  
CHARLOTTE NC 28290-5327

FIRST CITIZENS BANK  
PO BOX 29  
COLUMBIA SC 29202

HD SUPPLY  
PO BOX 509058  
SAN DIEGO CA 92150

HIMANSHU DESAI  
5161 HWY 27 E  
IRON STATION NC 28080

JOHN T. MOORE, ESQ.  
NELSON, MULLINS, RILEY & SCARBOROUGH, L  
1320 MAIN ST., 17TH FLOOR  
PO BOX 11070

KALPESH PATEL  
64 RIEDER ROAD  
EDISON NJ 08817

MARKET AMERICA  
PO BOX 7219  
RAINBOW CITY AL 35906

NILESH DESAI  
289 HAMPSHIRE COURT  
PISCATAWAY NJ 08854

NILESH DESAI  
3217 LANCASTER HWY  
RICHBURG SC 29729

QUILL CORPORATION  
PO BOX 37600  
PHILADELPHIA PA 19101

S PURI  
1913-204 J.N. PEASE PLACE  
UNIVERSITY RIDGE OFFICE CENTER  
CHARLOTTE NC 28262

SAMEEP INC  
2 BLOOMFIELD AVENUE  
BELLEVILLE NJ 07109

SANGITA PATEL  
622 GROVE AVENUE  
EDISON NJ 08820

SC DEPARTMENT OF REVENUE & TAXATION  
PO BOX 125  
COLUMBIA SC 29214

SOUTHERN HOSPITALITY SUPPLY  
10709-K GRANITE STREET  
CHARLOTTE NC 28273

UMESH PATEL  
622 GROVE AVE.  
EDISON NJ 08820

USA TODAY  
305 SEABORD LANE  
SUITE 301  
FRANKLIN TN 37067-8288



VARSHA DESAI  
3217 LANCASTER HWY  
RICHBURG SC 29729