

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

United States Bankruptcy Court for the:

**NORTHERN DISTRICT OF TEXAS**

Case number (if known): \_\_\_\_\_ Chapter 11

Check if this is an amended filing

Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

12/15

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 the case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name Heena Hospitality, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 20 - 3942914

4. Debtor's address **Principal place of business** **Mailing address, if different from principal place of business**

150 Alford Drive  
Number Street

\_\_\_\_\_  
Number Street

\_\_\_\_\_  
P.O. Box

Weatherford TX 76087  
City State ZIP Code

\_\_\_\_\_  
City State ZIP Code

Parker  
County

**Location of principal assets, if different from principal place of business**

\_\_\_\_\_  
Number Street

\_\_\_\_\_  
City State ZIP Code

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

6. Type of debtor  
 Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
 Partnership (excluding LLP)  
 Other. Specify: \_\_\_\_\_

Debtor Heena Hospitality, LLC

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.naics.com/search/>

\_\_\_\_ \_

**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 \$2,490,925 (amount subject to adjustment on 4/01/16 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. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

If more than 2 cases, attach a separate list.

Debtor Heena Hospitality, LLC Case number (if known) \_\_\_\_\_

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

No

Yes. Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_  
 Case number, if known \_\_\_\_\_ MM / DD / YYYY

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

Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_  
 Case number, if known \_\_\_\_\_ MM / DD / YYYY

**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 for distribution to unsecured creditors.

Debtor Heena Hospitality, LLC Case number (if known) \_\_\_\_\_

- |                                          |                                                |                                                              |                                                        |
|------------------------------------------|------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------|
| <b>14. Estimated number of creditors</b> | <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"/> 5,001-10,000                        | <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               |                                                              |                                                        |
| <b>15. Estimated assets</b>              | <input type="checkbox"/> \$0-\$50,000          | <input checked="" 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        |
| <b>16. Estimated liabilities</b>         | <input type="checkbox"/> \$0-\$50,000          | <input checked="" 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        |

**Part X: 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 06/10/2016  
MM / DD / YYYY

**X /s/ Bob Bhojwani** \_\_\_\_\_ **Bob Bhojwani** \_\_\_\_\_  
Signature of authorized representative of debtor Printed name

Title President

**18. Signature of attorney**

**X /s/ Joyce Lindauer** \_\_\_\_\_ Date 06/10/2016  
Signature of Attorney for Debtor MM / DD / YYYY

**Joyce Lindauer** \_\_\_\_\_  
Printed name

**Joyce W. Lindauer Attorney, PLLC** \_\_\_\_\_  
Firm Name

**12720 Hillcrest Road, Suite 625** \_\_\_\_\_  
Number Street

**Dallas** \_\_\_\_\_ **TX** \_\_\_\_\_ **75230** \_\_\_\_\_  
City State ZIP Code

Contact phone (972) 503-4033 Email address \_\_\_\_\_

**21555700** \_\_\_\_\_  
Bar number State

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION**

In re **Heena Hospitality, LLC**

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:

|                                                            |                           |
|------------------------------------------------------------|---------------------------|
| For legal services, I have agreed to accept.....           | <u><b>\$15,000.00</b></u> |
| Prior to the filing of this statement I have received..... | <u><b>\$3,500.00</b></u>  |
| Balance Due.....                                           | <u><b>\$11,500.00</b></u> |

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 another 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, statements 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;

B2030 (Form 2030) (12/15)

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

**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.

**06/10/2016**

*Date*

**/s/ Joyce Lindauer**

*Joyce Lindauer*

Joyce W. Lindauer Attorney, PLLC

12720 Hillcrest Road, Suite 625

Dallas, TX 75230

Phone: (972) 503-4033 / Fax: (972) 503-4034

Bar No. 21555700

**/s/ Bob Bhojwani**

**Bob Bhojwani**  
**President**

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

Debtor name Heena Hospitality, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

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 claims 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 the claim (for example, trade debts, bank loans, professional services, and government contracts) | Indicate if claim is contingent, unliquidated, or disputed | Amount of unsecured claim         |                                             |                 |
|---|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------|---------------------------------------------|-----------------|
|   |                                                                                                          |                                                               |                                                                                                             |                                                            | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| 1 | Citizens Bank<br>Attn: Lawrence Bertsch,<br>President<br>4201 S. Treadaway<br>Blvd.<br>Abilene, TX 79602 |                                                               | Purchase Money                                                                                              |                                                            | \$1,899,685.75                    | \$984,340.00                                | \$915,345.75    |
| 2 | Lexus Financial Services<br>P.O. Box 5855<br>Carol Stream, IL 60197-<br>5855                             |                                                               | Purchase Money                                                                                              |                                                            | \$19,500.00                       | \$15,000.00                                 | \$4,500.00      |
| 3 | Dipak Rana<br>8716 Windblow Court<br>Fort Worth, TX 76123                                                |                                                               | Business Debt                                                                                               |                                                            |                                   |                                             | \$2,308.35      |
| 4 | HD Supply<br>PO Box 509058<br>San Diego, CA 92150-<br>9058                                               |                                                               | Business Debt                                                                                               |                                                            |                                   |                                             | \$1,991.77      |
| 5 | Jacky Jayswal<br>1911 Wall Street<br>Weatherford, TX 76086                                               |                                                               | Business Debt                                                                                               |                                                            |                                   |                                             | \$1,942.01      |

Debtor Heena Hospitality, LLC Case number (if known) \_\_\_\_\_  
 Name

|   | Name of creditor and complete mailing address, including zip code                    | Name, telephone number, and email address of creditor contact | Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts) | Indicate if claim is contingent, unliquidated, or disputed | Amount of unsecured claim<br>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 |
| 6 | VFM Leonardo Inc.<br>111 Peter Street, Suite 530<br>Toronto Ontario M5V2H1<br>Canada |                                                               | Business Debt                                                                                               |                                                            |                                                                                                                                                                                                                                            |                                             | \$1,700.04      |
| 7 | Dish Network<br>Dept. 0063<br>Palatine, IL 60055-0065                                |                                                               | Business Debt                                                                                               |                                                            |                                                                                                                                                                                                                                            |                                             | \$913.57        |



**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION**

IN RE: **Heena Hospitality, LLC**

CASE NO

CHAPTER 11

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 6/10/2016

Signature /s/ Bob Bhojwani  
**Bob Bhojwani**  
**President**

Date \_\_\_\_\_

Signature \_\_\_\_\_

Attorney General of Texas  
Bankruptcy Div  
PO Box 12548  
Austin, TX 78711-2548

Citizens Bank  
Attn: Lawrence Bertsch, President  
4201 S. Treadaway Blvd.  
Abilene, TX 79602

Comptroller of Public Accts  
Revenue Acctg Div Bankruptcy Sec  
PO Box 13528  
Austin, TX 78711

Dipak Rana  
8716 Windblow Court  
Fort Worth, TX 76123

Dish Network  
Dept. 0063  
Palatine, IL 60055-0065

G6 Hospitality LLC  
Attn: Alan Rabinowitz, General Counsel  
4001 International Parkway  
Carrollton, TX 75007

HD Supply  
PO Box 509058  
San Diego, CA 92150-9058

Internal Revenue Service  
Mail Code DAL-5020  
1100 Commerce Street  
Dallas, Texas 75242

Jacky Jayswal  
1911 Wall Street  
Weatherford, TX 76086

Lexus Financial Services  
P.O. Box 5855  
Carol Stream, IL 60197-5855

U. S. Trustee's Office  
1100 Commerce Street  
Room 9C60  
Dallas, TX 75242

US Attny. General  
10th and Constitution Ave., NW  
Main Justice Bldg. Rm. 5111  
Washington, DC 20530

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111 Peter Street, Suite 530  
Toronto Ontario M5V2H1  
Canada