

Fill in this information to identify the case:

United States Bankruptcy Court for the:
SOUTHERN 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

04/16

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

1. Debtor's name HEALTH CARE TEMPORARIES, INC.

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

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

3. Debtor's federal Employer Identification Number (EIN) 7 6 - 0 0 4 6 6 5 9

4. Debtor's address

<p>Principal place of business</p> <p><u>8926 Sherbourne Street</u> Number Street</p> <p><u>Suite D</u></p> <hr/> <p><u>Houston TX 77016</u> City State ZIP Code</p> <p><u>Harris</u> County</p>	<p>Mailing address, if different from principal place of business</p> <p>_____ Number Street</p> <p>_____ P.O. Box</p> <hr/> <p>_____ City State ZIP Code</p> <p>Location of principal assets, if different from principal place of business</p> <p>_____ Number Street</p> <hr/> <p>_____ City State ZIP Code</p>
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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 HEALTH CARE TEMPORARIES, INC. Case number (if known) _____

7. Describe debtor's business

A. Check one:

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

B. Check all that apply:

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

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

____ - ____ - ____ - ____

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

Check one:

- Chapter 7
- Chapter 9
- Chapter 11.

Check all that apply:

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

- Chapter 12

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

- No

- Yes. 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 HEALTH CARE TEMPORARIES, INC. 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 HEALTH CARE TEMPORARIES, INC. Case number (if known) _____

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"/> 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 | | |
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 checked="" 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 |

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 02/12/2017
MM / DD / YYYY

X /s/ D'Anne Woods D'Anne Woods
Signature of authorized representative of debtor Printed name

Title Secretary

18. Signature of attorney X /s/ Susan Tran Date 02/12/2017
Signature of attorney for debtor MM / DD / YYYY

Susan Tran
Printed name

Corral Tran Singh LLP
Firm name

1010 Lamar
Number Street
Floor 11, Suite 1160

Houston TX 77002
City State ZIP Code

(832) 975-7300 Susan.Tran@ctsattorneys.com
Contact phone Email address

24075648 TX
Bar number State

Debtor(s): HEALTH CARE TEMPORARIES, INC.

Case No:

Chapter: 11

SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION

AIT
3723 Birch St., Suite 23
Newport Beach, CA 92660

Great American Financial Services
625 1st St SE Ste 800
Cedar Rapids, IA 52401

Sam's Club Credit
PO BOX 530981
Atlanta, GA 30353

American Express
P.O. Box 981537
El Paso, TX 79998

Harris County Tax Assessor
P.O. Box 4662
Houston, TX 77210

Sprint
P.O. Box 8077
London, KY 40742

Bank of America
P.O. Box 982238
El Paso TX 79998

HCTRA-Violations
Dept 1
P.O. Box 440
Houston, TX 77210

Texas Workforce Commission Regulatory In
Office of the Attorney General, Bankrupt
P.O. Box 12548
Austin, TX 78711

Birch Telecomm
320 Interstate North Parkway, SE
Atlanta, GA 30339

HEALTH CARE TEMPORARIES, INC.
8926 Sherbourne Street
Suite D
Houston, TX 77016

The Hartford Personal Lines
P.O. Box 14219
Lexington, KY 40512

Central Security Group
600 Kenrick Dr
Houston, TX 77060

Internal Revenue Service
P.O. Box 7317
Philadelphia, PA 19101

TLC Office Systems
8711 Fallbrook Dr
Houston, TX 77064

Citibank Advantage
15851 N. Dallas Fwy Suite 245
Addison, TX 75001

Joe Mastriano P.C.
8323 Southwest Fwy
Houston, TX 77074

U.S. Bank
800 Nicollet Mall
Minneapolis, MN 55402

City of Houston
P.O. Box 1560
Houston, TX 77251

Linebarger Goggan Blair &Sampson LLP
P.O. Box 3064
Houston, TX 77253

Valware Medius
500 W. Canton
Edinburg, TX 78539

Colonial Life & Accident Insurance Compa
P.O. Box 1365
Columbia, SC 29202

Office Depot
P.O. Box 689020
Des Moines, IA 50368

Wells Fargo
P.O. Box 14517
Des Moines, IA 50306

Comcast
P.O. Box 660618
Dallas, TX 75266

PITNEY BOWES GLOBAL FINANCIAL SEF
PO BOX 371887
PITTSBURGH PA 15250-7887

Grasshopper
197 1st Avenue, Suite 200
Needham Heights, MA 02494

Republic Waste
P.O. Box 78829
Phoenix, AZ 85062