

Fill in this information to identify the case:

United States Bankruptcy Court for the:

District Of Texas Southern

(State)

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** Trident Crating & Services, 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 1 1 3 2 3

4. **Debtor's address**

Principal place of business

Mailing address, if different from principal place of business

14320 Interdrive East

Number Street

Number Street

P.O. Box

Houston

City

TX

State

77032

ZIP Code

City

State

ZIP Code

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

HARRIS

County

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 Trident Crating & Services, Inc.
Name

Case number (if known) _____

7. Describe debtor's business

A. Check one:

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

B. Check all that apply:

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

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

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

Check one:

- ☐ Chapter 7
- ☐ Chapter 9
- ☒ Chapter 11. Check all that apply:

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

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

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 _____
MM / DD / YYYY

Case number, if known _____

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

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

11. Why is the case filed in *this* district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

- ☒ No
- ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____

Where is the property? _____

Number Street

City

State

ZIP Code

Is the property insured?

- ☐ No
- ☐ Yes. Insurance agency _____
- Contact name _____
- Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds**

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available for distribution 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"/> 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 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 Trident Crating & Services, Inc.
Name

Case number (if known) _____

16. Estimated liabilities

- | | | |
|--|--|--|
| <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 |

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 02/15/2019
MM / DD / YYYY**X**s/Robert Allmaras

Signature of authorized representative of debtor

Robert Allmaras

Printed name

Title President

18. Signature of attorney

Xs/Margaret M. McClure

Signature of attorney for debtor

Date

02/15/2019

MM / DD / YYYY

Margaret M. McClure

Printed name

Law Office of Margaret M. McClure

Firm name

909 Fannin, Suite 3810

Number Street

Houston

City

TX
State77010
ZIP Code(713) 659-1333

Contact phone

Margaret@mmmclurelaw.com
Email address00787997

Bar number

TX
State

UNITED STATES BANKRUPTCY COURT
District of Texas Southern
Houston Division

In re:

Case No. BKY

Trident Crating & Services, Inc.,

Debtor(s)

Chapter 11 Case

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

I, Robert Allmaras, declare under penalty of perjury that I am the President of Trident Crating & Services, Inc., a Texas corporation and that on February 11, 2019 the following resolution was duly adopted by the Sole Shareholder of this corporation:

"Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that Robert Allmaras, President of this corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that Robert Allmaras, President of this corporation, is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case; and

Be It Further Resolved, that Robert Allmaras, President of this corporation, is authorized and directed to employ Margaret M. McClure, attorney and the law firm of Law Office of Margaret M. McClure to represent the corporation in such bankruptcy case."

Executed on: February 15, 2019	Signed: s/Robert Allmaras
	Robert Allmaras 14320 Interdrive East, Houston, TX 77032 (<i>Name and Address of Subscriber</i>)

Fill in this information to identify the case:Debtor name Trident Crating & Services, Inc.United States Bankruptcy Court for the: District of Texas Southern

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 Assets1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)1a. **Real property:**Copy line 88 from *Schedule A/B*\$ 0.001b. **Total personal property:**Copy line 91A from *Schedule A/B*\$ 166,300.001c. **Total of all property:**Copy line 92 from *Schedule A/B*\$ 166,300.00**Part 2: Summary of Liabilities**2. **Schedule D: Creditors Who Hold Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, at the bottom of page 1 of *Schedule D*\$ 0.003. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)3a. **Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 6a of *Schedule E/F*\$ 210,300.003b. **Total amount of claims of non-priority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F*+ \$ 1,439,460.554. **Total liabilities**

Lines 2 + 3a + 3b

\$ 1,649,760.55

Fill in this information to identify the case:Debtor name Trident Crating & Services, Inc.United States Bankruptcy Court for the: District of Texas Southern

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

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

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

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

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand**\$ 0.00**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Chase BankChecking Account9 3 3 7\$ 5,000.003.2. See Attachment 1

\$ _____

See Attachment 2: Additional Checking, Savings, Money Market, or Financial Brokerage Accounts

4. Other cash equivalents (Identify all)

4.1. _____ \$ _____

4.2. _____ \$ _____

5. Total of Part 1\$ 8,300.00

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
- ☐ Yes. Fill in the information below.

Current value of debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. _____ \$ _____

7.2. _____ \$ _____

Debtor Trident Crating & Services, Inc. Case number (if known) _____
 Name

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____

8.2. _____ \$ _____

9. Total of Part 2.

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

\$ _____

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**

11a. 90 days old or less: \$135,000.00 - \$0.00 = → \$135,000.00
 face amount doubtful or uncollectible accounts

11b. Over 90 days old: \$0.00 - \$0.00 = → \$0.00
 face amount doubtful or uncollectible accounts

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 135,000.00**Part 4: Investments****13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.**Valuation method
used for current value****Current value of debtor's
interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____ % _____ \$ _____

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Debtor

Trident Crating & Services, Inc.

Case number (if known)

Name

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				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
Lumber & Packing Supplies	_____	\$ _____	_____	\$ 10,000.00
_____	MM / DD / YYYY			
23. Total of Part 5				\$ 10,000.00
Add lines 19 through 22. Copy the total to line 84.				

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.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____

Debtor

Trident Crating & Services, Inc.

Name

Case number (if known)

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. **Is the debtor a member of an agricultural cooperative?**☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____36. **Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☐ No. Go to Part 8.☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
_____	\$ _____	_____	\$ _____
40. Office fixtures			
_____	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software			
Office Equipment, Furnishings & Supplies	\$ _____	_____	\$ 3,000.00
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ 3,000.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**☐ No☐ Yes45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**☐ No☐ Yes

Debtor

Trident Crating & Services, Inc.

Name

Case number (if known)

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.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 2004 Dodge Ram - Paid for	\$		\$ 2,500.00
47.2	\$		\$
47.3	\$		\$
47.4	\$		\$
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 2004 Pace Trailer - Paid for	\$		\$ 750.00
48.2 See Attachment 3	\$		\$
See Attachment 4: Additional Watercraft, Trailers, Motors, and Related Accessories			
49. Aircraft and accessories			
49.1	\$		\$
49.2	\$		\$
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
Saws, Compressors & Generators	\$		\$ 5,000.00
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ 10,000.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Debtor

Trident Crating & Services, Inc.

Name

Case number (if known)

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 Leasehold interest in business space	Leasehold	\$		\$ Unknown
55.2 leased to Debtor at 14320 Interdrive East,		\$		\$
55.3 Houston, TX 77032		\$		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

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	\$		\$
62. Licenses, franchises, and royalties	\$		\$
63. Customer lists, mailing lists, or other compilations	\$		\$
64. Other intangibles, or intellectual property	\$		\$
65. Goodwill	\$		\$

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$

Debtor

Trident Crating & Services, Inc.
Name

Case number (if known)

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)

_____	—	_____	= →	\$ _____
	Total face amount	doubtful or uncollectible amount		

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____	\$ _____
-------	----------

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

_____	\$ _____
-------	----------

Nature of claim _____

Amount requested \$ _____

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

_____	\$ _____
-------	----------

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____	\$ _____
-------	----------

77. Other property of any kind not already listed Examples: Season tickets, country club membership

_____	\$ _____
_____	\$ _____

78. Total of Part 11.

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

\$ _____

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

- ☐ No
☐ Yes

Debtor

Trident Crating & Services, Inc.

Name

Case number (if known)

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>	\$ 8,300.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 135,000.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ 10,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. Office furniture, fixtures, and equipment, and collectibles. <i>Copy line 43, Part 7.</i>	\$ 3,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 10,000.00	
88. Real property. <i>Copy line 56, Part 9.</i>	→	\$ 0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ 0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 166,300.00	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ 166,300.00

Attachment
Debtor: Trident Crating & Services, Inc. Case No:

Attachment 1

Amegy Bank
Checking Account
4058
2,800.00

Chase Bank
Savings Account
7288
500.00

Attachment 2: Additional Checking, Savings, Money Market, or Financial Brokerage Accounts

Institution: Chase Bank
Account Type: Savings Account
Last 4 Digits of Account Number: 7288
Value: \$500.00

Attachment 3

2006 Pace Trailer - Paid for
1,000.00

2005 Homemade Trailer - Paid for
750.00

Attachment 4: Additional Watercraft, Trailers, Motors, and Related Accessories

Description: 2005 Homemade Trailer - Paid for
Book Value:
Value: \$750.00

Fill in this information to identify the case:

Debtor name Trident Crating & Services, Inc.
 United States Bankruptcy Court for the: District of Texas Southern
 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
Amount of claim
 Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2.1 Creditor's name <u>14310 14320 Interdrive East, LLC</u> Creditor's mailing address <u>7817 W Rayford Road</u> <u>Spring, TX 77389</u> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority. _____ _____	Describe debtor's property that is subject to a lien <u>Lease of business space to Debtor</u> Describe the lien <u>Lease</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>Unknown</u>	\$ <u>Unknown</u>
2.2 Creditor's name <u>Harris County, et al</u> Creditor's mailing address <u>c/o John P. Dillman, P.O. Box 3064</u> <u>Houston, TX 77253</u> 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? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>Property taxes</u> Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>Unknown</u>	\$ <u>Unknown</u>
3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.		\$ <u>0.00</u>	

Fill in this information to identify the case:

Debtor Trident Crating & Services, Inc.

United States Bankruptcy Court for the: District of Texas Southern

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.

2.1 Priority creditor's name and mailing address

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101

Date or dates debt was incurred _____

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is: \$200,000.00

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Taxes and Other Government Debts

Is the claim subject to offset?

- ☒ No
☐ Yes

Total claim

Priority amount

\$200,000.00

\$200,000.00

2.2 Priority creditor's name and mailing address

Texas Comptroller of Public Accounts
c/o Ofc of Attorney General, P.O. Box 12548
Austin, TX 78711

Date or dates debt was incurred _____

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is: \$1,800.00

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Taxes and Other Government Debts

Is the claim subject to offset?

- ☒ No
☐ Yes

\$1,800.00

\$1,800.00

2.3 Priority creditor's name and mailing address

Texas Workforce Commission
c/o Ofc of Attorney General, P.O. Box 12548
Austin, TX 78711

Date or dates debt was incurred _____

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is: \$8,500.00

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:
Taxes and Other Government Debts

Is the claim subject to offset?

- ☒ No
☐ Yes

\$8,500.00

\$8,500.00

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 4 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <u>Advanced International Services,</u> <u>dba of Matt-Alex, Inc. 654 N Sam Houston Pkwy. E, Suite 225</u> <u>Houston, TX 77060</u> Date or dates 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 checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>432,254.82</u>
3.2	Nonpriority creditor's name and mailing address <u>Amax Leasing Source</u> <u>3580 Wilshie Blvd., Suite 160</u> <u>Los Angeles, CA 90010</u> Date or dates 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: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>Unknown</u>
3.3	Nonpriority creditor's name and mailing address <u>American Express</u> <u>P.O. Box 650448</u> <u>Dallas, Texas 75265-0448</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>2 0 0 9</u>	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>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>77,033.99</u>
3.4	Nonpriority creditor's name and mailing address <u>Brilliant Energy</u> <u>800 Wilcrest Drive, Suite 109</u> <u>Houston, TX 77042</u> Date or dates 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: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>3,500.00</u>
3.5	Nonpriority creditor's name and mailing address <u>Channel Partners Capital, LLC</u> <u>11100 Wayzata Blvd., Suite 305</u> <u>Minnetonka, MN 55305</u> Date or dates debt was incurred <u>2/23/18</u> Last 4 digits of account number <u>9 6 2 1</u>	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: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>100,000.00</u>
3.6	Nonpriority creditor's name and mailing address <u>Chase</u> <u>P.O. Box 94014</u> <u>Palatine, IL 60094</u> Date or dates 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>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>52,572.84</u>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	Nonpriority creditor's name and mailing address Compass Global Logistics P.O. Box 8458 The Woodlands, TX 77387 Date or dates 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 <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 9,675.00
3.8	Nonpriority creditor's name and mailing address Forward Financing, LLC 100 Summer Street, Suite 1175 Boston, MA 02110 Date or dates debt was incurred 11/21/18 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: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
3.9	Nonpriority creditor's name and mailing address Hugo Teste and Oliverio Alonso c/o Jim L. Culpepper 9821 Katy Freeway, Suite 110 Houston, TX 77024 Date or dates 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: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
3.10	Nonpriority creditor's name and mailing address LG Funding, LLC 1218 Union Street Brooklyn, NY 11225 Date or dates debt was incurred 10/11/18 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: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
3.11	Nonpriority creditor's name and mailing address Lincoln Lumber, LLC c/o Bill Richey 400 Neches at Crockett, Santa Fe Depot Beaumont, TX 77701 Date or dates 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: Lawsuit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 658,843.11

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.12	Nonpriority creditor's name and mailing address Lonestar Forklift 4213 Forest Lane Garland, TX 75042 Date or dates 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 <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 21,622.12
3.13	Nonpriority creditor's name and mailing address LRB Transportation 10641 Harwin Drive, Suite 510 Houston, TX 77036 Date or dates 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: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 12,090.00
3.14	Nonpriority creditor's name and mailing address Opportunity Appointments c/o Samantha Jones 801 E Campbell Road, Suite 165 Richardson, TX 75081 Date or dates debt was incurred _____ Last 4 digits of account number <u>1 4 1 3</u>	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: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,800.00
3.15	Nonpriority creditor's name and mailing address Ranger Lift Trucks c/o Ronnie Ruffeno 2100 I-10 East Baytown, TX 77521 Date or dates debt was incurred _____ Last 4 digits of account number <u>1 0 0 3</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Judgment - Disputed - Duplicate Invoices Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 8,547.42
3.16	Nonpriority creditor's name and mailing address Ranger Lift Trucks c/o Ronnie Ruffeno 2100 I-10 East Baytown, TX 77521 Date or dates debt was incurred _____ Last 4 digits of account number <u>1 0 0 3</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Judgment - Paid 2/11/19 to Constable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 9,023.24

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.17	Nonpriority creditor's name and mailing address Veryable, Inc. 2017 W. Lamar Street, Suite 250 Dallas, TX 75202 Date or dates 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 <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,466.95
3.18	Nonpriority creditor's name and mailing address Waste Management of Texas, Inc. c/o Sean M. Rooney 11767 Katy Freeway, Suite 920 Houston, TX 77090 Date or dates 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: Judgment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 13,484.74
3.19	Nonpriority creditor's name and mailing address Wide Merchant Investment, Inc. 3580 Wilshire Blvd., #160 Los Angeles, Ca 90010 Date or dates 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: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 32,546.32
3.20	Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates 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: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____
3.21	Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates 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: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____

Part 3:**List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. Internal Revenue Service Special Procedures, Insolvency Sect. II, 1919 Smith Street, Stop 5025HOU Houston, TX 77002	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.2. Internal Revenue Service-U.S. Attorney 1000 Louisiana Street, Suite 2300 Houston, TX 77002	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.3. Internal Revenue Service-US Atty 10th & Constitution, N.W. Washington, DC 20530	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.4. Texas Comptroller of Public Accounts P.O. Box 149359 Austin, TX 78714	Line <u>2.2</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.5. Texas Comptroller of Public Accounts 111 E. 17th Street Austin, TX 78774	Line <u>2.2</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.6. Texas Workforce Commission Regulatory Integrity Division-SAU, 101 E. 15th Street, Room 556 Austin, TX 78778	Line <u>2.3</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.7. Texas Workforce Commission c/o Office of the Attorney General, P.O. Box 12548 Austin, Texas 78711	Line <u>2.3</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.8. Chase P.O. Box 15298 Wilmington, DE 19850	Line <u>3.6</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.9. Lincoln Lumber, LLC/ Lincoln Lumber Company, LP, P.O. Box 778 Conroe, TX 77305	Line <u>3.11</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.10. LRB Transportation c/o Accounts Receivable, 1806 33rd Street, Suite 180 Orlando, FL 32839	Line <u>3.13</u> <input type="checkbox"/> Not listed. Explain _____	— — — —
4.11. Opportunity Appointments 17 Alejo Irvine, CA 92612	Line <u>3.14</u> <input type="checkbox"/> Not listed. Explain _____	<u>1 4 1 3</u>
4.12. Waste Management of Texas, Inc. Attn: Gary White, 1901 Afton Lane Houston, TX 77055	Line <u>3.18</u> <input type="checkbox"/> Not listed. Explain _____	— — — —

Part 3: Additional Page for Others to Be Notified About Unsecured Claims

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
4.13 Wide Merchant Investment, Inc. c/o AMA Recovery Group, LLC, 3131 Eastside Street, Suite 350 Houston, TX 77098	Line 3.19 <input type="checkbox"/> Not listed. Explain _____	____ _
4.14 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.15 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.16 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.17 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.18 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.19 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.20 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.21 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.22 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.23 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.24 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.25 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.26 _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.****Total of claim amounts**

5a. Total claims from Part 1	5a.	\$ 210,300.00
5b. Total claims from Part 2	5b. +	\$ 1,439,460.55
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$ 1,649,760.55

Fill in this information to identify the case:Debtor name Trident Crating & Services, Inc.United States Bankruptcy Court for the: District of Texas SouthernCase number (If known): _____ Chapter 11☐ 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, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?☐ No. Check this box and file this form with the court 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 contracts or 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	<u>Business space lease to Debtor</u>	<u>14310 14320 Interdrive East, LLC</u>
	State the term remaining		<u>7817 W Rayford Road</u>
	List the contract number of any government contract		<u>Spring TX 77389</u>
2.2	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.5	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		

Fill in this information to identify the case:Debtor name Trident Crating & Services, Inc.United States Bankruptcy Court for the: District of Texas Southern

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206H****Schedule H: 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. Does the debtor 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 Robert Allmaras	14320 Interdrive East Street			American Express	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
	Houston	TX	77032	See Attachment 1	
	City	State	ZIP Code		
2.2	Street				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City State ZIP Code				
2.3	Street				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City State ZIP Code				
2.4	Street				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City State ZIP Code				
2.5	Street				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City State ZIP Code				
2.6	Street				<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City State ZIP Code				

Attachment

Debtor: Trident Crating & Services, Inc. Case No:

Attachment 1

Channel Partners Capital, LLC, Schedule E/F

LG Funding, LLC, Schedule E/F

Wide Merchant Investment, Inc., Schedule E/F

Fill in this information to identify the case and this filing:Debtor Name Trident Crating & Services, Inc.United States Bankruptcy Court for the: District Of Texas Southern

Case number (If known): _____

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)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206—Summary)
- ☐ 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 02/15/2019
MM / DD / YYYY

Xs/Robert Allmaras

Signature of individual signing on behalf of debtor

Robert Allmaras

Printed name

President

Position or relationship to debtor

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF TEXAS SOUTHERN**

In Re:

Trident Crating & Services, Inc.,
Debtor

Case No.

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007, Fed. R. Bank. P. for filing in this Chapter 11 case.

Security Holder's Registered Name and Last Known Address or Place of Business	Class of Security	Number of Securities or Percentage	Kind of Interest
Robert Allmaras 14320 Interdirve East Houston, TX 77032	Common	100% Ownership	Shareholder

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

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

Date: February 15, 2019Signature: s/Robert AllmarasPrinted Name: Robert AllmarasTitle: 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.

Fill in this information to identify the case:

Debtor name Trident Crating & Services, Inc.

United States Bankruptcy Court for the: District of Texas Southern

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 <u>01/01/2019</u> MM / DD / YYYY	to Filing date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>202,808.21</u>
For prior year:	From <u>01/01/2018</u> MM / DD / YYYY	to <u>12/31/2018</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>1,856,709.48</u>
For the year before that:	From <u>01/01/2017</u> MM / DD / YYYY	to <u>12/31/2017</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>1,752,621.00</u>

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)
From the beginning of the fiscal year to filing date:	From _____ MM / DD / YYYY	to Filing date	_____	\$ _____
For prior year:	From _____ MM / DD / YYYY	to _____ MM / DD / YYYY	_____	\$ _____
For the year before that:	From _____ MM / DD / YYYY	to _____ MM / DD / YYYY	_____	\$ _____

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

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 or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____ Relationship to debtor _____	_____	\$ _____	_____
4.2. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____ Relationship to debtor _____	_____	\$ _____	_____

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

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	Description of the property	Date	Value of property
5.1. _____ Creditor's name _____ Street _____ City State ZIP Code	_____	_____	\$ _____
5.1. _____ Creditor's name _____ Street _____ City State ZIP Code	_____	_____	\$ _____

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
_____ Creditor's name _____ Street _____ City State ZIP Code	_____	_____	\$ _____
Last 4 digits of account number: XXXX- ____ _			

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	Nature of case	Court or agency's name and address	Status of case
7.1. <u>Lincoln Lumber, LLC v Trident</u> Case number <u>18-06-07359</u>	<u>Lawsuit</u>	<u>284th Judicial District Court</u> Name <u>Montgomery County</u> Street <u>301 N Main Street, #201</u> <u>Conroe TX 77301</u> City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. <u>Waste Management TX v Trident</u> Case number <u>1108575</u>	<u>Judgment</u>	<u>County Civil Court at Law No. 4</u> Name _____ Street _____ <u>Houston TX 77002</u> City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

See Attachment 1

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

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

Custodian's name and address	Description of the property	Value
Custodian's name _____ Street _____ City State ZIP Code	Case title _____ Case number _____ Date of order or assignment _____	\$ _____ Court name and address _____ Name _____ Street _____ City State ZIP Code

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
9.1. Recipient's name _____ Street _____ City State ZIP Code	_____ _____	_____	\$ _____
Recipient's relationship to debtor _____			
9.2. Recipient's name _____ Street _____ City State ZIP Code	_____ _____	_____	\$ _____
Recipient's relationship to debtor _____			

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss 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).	Date of loss	Value of property lost
_____ _____	_____ _____	_____	\$ _____

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

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?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<u>Margaret M. McClure</u> Address <u>Attorney at Law</u> <u>Street</u> <u>909 Fannin, Suite 3810</u> <u>Houston TX 77010</u> <small>City State ZIP Code</small>		<u>2/11/19</u>	\$ <u>25,000.00</u>
	Email or website address 			
	Who made the payment, if not debtor? 			
11.2.	 Address <u>Street</u> <u>City State ZIP Code</u>			\$ _____
	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
			\$ _____
Trustee 			

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

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?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. <u>Ranger Lift Trucks</u>	<u>Amount paid to Constable in satisfaction of</u>	<u>2/11/19</u>	<u>\$9,232.84</u>
Address <u>2100 I-10 East</u> Street <u>Baytown</u> <u>TX</u> <u>77521</u> City State ZIP Code		<u>Judgment in Case No. 183200371980</u>	
Relationship to debtor <u>Judgment Creditor</u>			

13.2.	Who received transfer? _____ _____ \$ _____
Address _____ Street _____ _____ City State ZIP Code	
Relationship to debtor _____	

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
14.1. _____ Street _____ _____ City State ZIP Code	_____	_____
14.2. _____ Street _____ _____ City State ZIP Code	_____	_____

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

Part 8: Healthcare Bankruptcies**15. Healthcare 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
---------------------------	--	---

15.1. _____
Facility name _____

Street _____

City _____ State _____ ZIP Code _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

☐ Electronically

☐ Paper

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

15.2. _____
Facility name _____

Street _____

City _____ State _____ ZIP Code _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

☐ Electronically

☐ Paper

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. _____
- Does the debtor have a privacy policy about that information?
- ☐ No
- ☐ Yes

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?
- ☐ No. Go to Part 10.
- ☐ Yes. Fill in below:

Name of plan	Employer identification number of the plan
--------------	--

EIN: ____ - ____ - ____ - ____ - ____

Has the plan been terminated?

- ☐ No
- ☐ Yes

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

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	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	<div>_____</div> <div>Name</div> <div>_____</div> <div>Street</div> <div>_____</div> <div>City</div> <div>State</div> <div>ZIP Code</div>	XXXX-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2.	<div>_____</div> <div>Name</div> <div>_____</div> <div>Street</div> <div>_____</div> <div>City</div> <div>State</div> <div>ZIP Code</div>	XXXX-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

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	Description of the contents	Does debtor still have it?
<div>_____</div> <div>Name</div> <div>_____</div> <div>Street</div> <div>_____</div> <div>City</div> <div>State</div> <div>ZIP Code</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<input type="checkbox"/> No <input type="checkbox"/> Yes
<div>Address</div> <div>_____</div> <div>_____</div>			

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	Does debtor still have it?
<div>_____</div> <div>Name</div> <div>_____</div> <div>Street</div> <div>_____</div> <div>City</div> <div>State</div> <div>ZIP Code</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<input type="checkbox"/> No <input type="checkbox"/> Yes
<div>Address</div> <div>_____</div> <div>_____</div>			

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			\$ _____
Street			
City State ZIP Code			

Part 12: Details About Environmental 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	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending
	Street		<input type="checkbox"/> On appeal
	City State ZIP Code		<input type="checkbox"/> Concluded

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
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

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
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	
_____	_____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

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 and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1.	Trident Crating & Services, Inc. Name 14320 Interdrive East Street _____ Houston TX 77032 City State ZIP Code	Export crating and logistics _____ _____	EIN: <u>7</u> <u>6</u> - <u>0</u> <u>0</u> <u>1</u> <u>1</u> <u>3</u> <u>2</u> <u>3</u> Dates business existed From <u>1/27/83</u> To _____
25.2.	_____ Name _____ Street _____ _____ City State ZIP Code	_____ _____ _____	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ - _____ Dates business existed From _____ To _____
25.3.	_____ Name _____ Street _____ _____ City State ZIP Code	_____ _____ _____	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ - _____ Dates business existed From _____ To _____

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

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****Dates of service**

26a.1. Robert Allmaras
Name
14320 Interdrive East
Street
Houston TX 77032
City State ZIP Code

From 01/27/1983 To _____**Name and address****Dates of service**

26a.2. _____
Name

Street

City State ZIP Code

From _____ To _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None**Name and address****Dates of service**

26b.1. _____
Name

Street

City State ZIP Code

From _____ To _____

Name and address**Dates of service**

26b.2. _____
Name

Street

City State ZIP Code

From _____ To _____

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. Robert Allmaras
Name
14320 Interdrive East
Street
Houston TX 77032
City State ZIP Code

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

Name and address**If any books of account and records are unavailable, explain why**

26c.2.

Name _____

Street _____

City _____

State _____

ZIP Code _____

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**

26d.2.

Name _____

Street _____

City _____

State _____

ZIP Code _____

Name and address

26d.2.

Name _____

Street _____

City _____

State _____

ZIP Code _____

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**_____
\$ _____**Name and address of the person who has possession of inventory records**

27.1.

Name _____

Street _____

City _____

State _____

ZIP Code _____

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

Name of the person who supervised the taking of the inventory

Date of
inventoryThe dollar amount and basis (cost, market, or
other basis) of each inventory

\$ _____

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

27.2.

Name _____

Street _____

City _____

State _____

ZIP Code _____

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
Robert Allmaras	14320 Interdrive East, Houston, Tx 77032	President - Sole Shareholder	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.

Name	Address	Position and nature of any interest	Period during which position or interest was held
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____

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
30.1. <u>Robert Allmaras</u> Name <u>14320 Interdrive East</u> Street <u>Houston</u> <u>TX</u> <u>77032</u> City State ZIP Code	<u>\$47,200.00</u>	<u>Prev 12</u> <u>months</u>	<u>Pay</u>
Relationship to debtor <u>President</u>			

Debtor Trident Crating & Services, Inc.
Name

Case number (if known) _____

Name and address of recipient

Name _____

Street _____

City _____

State _____

ZIP Code _____

Relationship to debtor

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

EIN: ____ - ____ - ____ - ____ - ____

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 pension fund _____

Employer Identification number of the pension fund

EIN: ____ - ____ - ____ - ____ - ____

Part 14: Signature and Declaration

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

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

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

Executed on 02/15/2019
MM / DD / YYYY

Xs/Robert AllmarasPrinted name Robert Allmaras

Signature of individual signing on behalf of the debtor

Position or relationship to debtor PresidentAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?☒ No☐ Yes

Attachment

Debtor: Trident Crating & Services, Inc.

Case No:

Attachment 1

Case Title: Ranger Lift Trucks

Case Number: 183200371980

Nature of Case: Judgment

Court or Agency's Name Justice Court

Creditor's Address: Precinct 3, Place 2, 701 West Baker Road, Baytown, TX 77521

Status of Case: Concluded

Case Title: Ranger Lift Trucks

Case Number: 183200371982

Nature of Case: Judgment

Court or Agency's Name Justice Court

Creditor's Address: Precinct 3, Place 2, 701 West Baker Road, Baytown, TX 77521

Status of Case: Concluded

Case Title: Hugo Teste & Oliverio Alonso v Matt-Alex, Inc., et al

Case Number: 2017-14240

Nature of Case: Lawsuit

Court or Agency's Name 55th Judicial District Court

Creditor's Address: 201 Caroline, Houston, TX 77002

Status of Case: Pending

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
DISTRICT OF TEXAS SOUTHERN
HOUSTON DIVISION

In re
Trident Crating & Services, Inc.

Case No. _____

DebtorChapter **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 \$ **25,000.00**

Prior to the filing of this statement I have received \$ **25,000.00**

Balance Due \$ **0.00**

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 other 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;

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- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

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.

February 15, 2019
Date

s/Margaret M. McClure
Signature of Attorney

Law Office of Margaret M. McClure
Name of law firm

Trident Crating & Services, Inc.
14320 Interdrive East
Houston, TX 77032

14310 14320 Interdrive East, LLC
7817 W Rayford Road
Spring, TX 77389

Advanced International Services,
dba of Matt-Alex, Inc.
654 N Sam Houston Pkwy. E, Suite 225
Houston, TX 77060

Amax Leasing Source
3580 Wilshie Blvd., Suite 160
Los Angeles, CA 90010

American Express
P.O. Box 650448
Dallas, TX 75265-0448

Brilliant Energy
800 Wilcrest Drive, Suite 109
Houston, TX 77042

Channel Partners Capital, LLC
11100 Wayzata Blvd., Suite 305
Minnetonka, MN 55305

Chase
P.O. Box 15298
Wilmington, DE 19850

Chase
P.O. Box 94014
Palatine, IL 60094

Compass Global Logistics
P.O. Box 8458
The Woodlands, TX 77387

Forward Financing, LLC
100 Summer Street, Suite 1175
Boston, MA 02110

Harris County, et al
c/o John P. Dillman
P.O. Box 3064
Houston, TX 77253

Hugo Teste and Oliverio Alonso
c/o Jim L. Culpepper
9821 Katy Freeway, Suite 110
Houston, TX 77024

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101

Internal Revenue Service
Special Procedures, Insolvency Sect. II
1919 Smith Street, Stop 5025HOU
Houston, TX 77002

Internal Revenue Service-U.S. Attorney
1000 Louisiana Street, Suite 2300
Houston, TX 77002

Internal Revenue Service-US Atty
10th & Constitution, N.W.
Washington, DC 20530

LG Funding, LLC
1218 Union Street
Brooklyn, NY 11225

Lincoln Lumber, LLC
c/o Bill Richey
400 Neches at Crockett, Santa Fe Depot
Beaumont, TX 77701

Lincoln Lumber, LLC/
Lincoln Lumber Company, LP
P.O. Box 778
Conroe, TX 77305

Lonestar Forklift
4213 Forest Lane
Garland, TX 75042

LRB Transportation
10641 Harwin Drive, Suite 510
Houston, TX 77036

LRB Transportation
c/o Accounts Receivable
1806 33rd Street, Suite 180
Orlando, FL 32839

Opportunity Appointments
c/o Samantha Jones
801 E Campbell Road, Suite 165
Richardson, TX 75081

Opportunity Appointments
17 Alejo
Irvine, CA 92612

Ranger Lift Trucks
c/o Ronnie Ruffeno
2100 I-10 East
Baytown, TX 77521

Texas Comptroller of Public Accounts
c/o Ofc of Attorney General
P.O. Box 12548
Austin, TX 78711

Texas Comptroller of Public Accounts
111 E. 17th Street
Austin, TX 78774

Texas Comptroller of Public Accounts
P.O. Box 149359
Austin, TX 78714

Texas Workforce Commission
c/o Ofc of Attorney General
P.O. Box 12548
Austin, TX 78711

Texas Workforce Commission
c/o Office of the Attorney General, P.O. Box 12548
Austin, TX 78711

Texas Workforce Commission
Regulatory Integrity Division-SAU
101 E. 15th Street, Room 556
Austin, TX 78778

Veryable, Inc.
2017 W. Lamar Street, Suite 250
Dallas, TX 75202

Waste Management of Texas, Inc.
c/o Sean M. Rooney
11767 Katy Freeway, Suite 920
Houston, TX 77090

Waste Management of Texas, Inc.
Attn: Gary White
1901 Afton Lane
Houston, TX 77055

Wide Merchant Investment, Inc.
3580 Wilshire Blvd., #160
Los Angeles, Ca 90010

Wide Merchant Investment, Inc.
c/o AMA Recovery Group, LLC
3131 Eastside Street, Suite 350
Houston, TX 77098

UNITED STATES BANKRUPTCY COURT
District of Texas Southern
Houston Division

In re: **Trident Crating & Services, Inc.**

Debtors

Case No. _____

Chapter **11**

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

Dated: **February 15, 2019**

Signed: **s/Robert Allmaras**

Dated: _____

Signed: _____