

Fill in this information to identify your case:

United States Bankruptcy Court for the:
WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) _____ Chapter **11**

Check if this an amended filing

Official Form 201 Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Advanced Vascular Resource of Johnstown, LLC

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 35-2484956

| | | |
|---------------------|--|--|
| 4. Debtor's address | Principal place of business | Mailing address, if different from principal place of business |
| | <u>1027 Broad Street</u> <u>Johnstown, PA 15906</u> <small>Number, Street, City, State & ZIP Code</small> <u>Cambria</u> <small>County</small> | <u>15245 Shady Grove Road</u> <u>Suite 325N</u> <u>Rockville, MD 20850</u> <small>P.O. Box, Number, Street, City, State & ZIP Code</small> <small>Location of principal assets, if different from principal place of business</small> <small>Number, Street, City, State & ZIP Code</small> |

5. Debtor's website (URL) _____

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

Debtor Advanced Vascular Resource of Johnstown, LLC Case number (if known) _____
Name

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>.

6214

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

- Chapter 7
- Chapter 9

Chapter 11. Check all that apply:

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

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years? No. Yes.

If more than 2 cases, attach a separate list.

| | | | | | |
|----------|-------|------|-------|-------------|-------|
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? No. Yes.

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

| | | | |
|----------|-------|-----------------------|-------|
| Debtor | _____ | Relationship | _____ |
| District | _____ | When | _____ |
| | | Case number, if known | _____ |

Debtor Advanced Vascular Resource of Johnstown, LLC Case number (if known) _____
Name

11. Why is the case filed in this district? *Check all that apply:*

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

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

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

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

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

Where is the property? _____
 Number, Street, City, State & ZIP Code

Is the property insured?

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

Statistical and administrative information

13. Debtor's estimation of available funds *Check one:*

- Funds will be available for distribution to unsecured creditors.
- After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

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

15. Estimated Assets

| | | |
|--|--|--|
| <input 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 |

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 |

Debtor Advanced Vascular Resource of Johnstown, LLC
Name

Case number (if known) _____

Request for Relief, Declaration, and Signatures

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

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
I have been authorized to file this petition on behalf of the debtor.
I have examined the information in this petition and have a reasonable belief that the information is true and correct.
I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 21, 2017
MM / DD / YYYY

/s/ Mubashar A. Choudry
Signature of authorized representative of debtor

Title President

Mubashar A. Choudry
Printed name

18. Signature of attorney

/s/ Robert O Lampl
Signature of attorney for debtor

Date November 21, 2017
MM / DD / YYYY

Robert O Lampl
Printed name

Robert O Lampl Law Office
Firm name

Benedum Trees Building
223 Fourth Avenue, 4th Floor
Pittsburgh, PA 15222
Number, Street, City, State & ZIP Code

Contact phone 412-392-0330 Email address rlampl@lampllaw.com

19809
Bar number and State

Fill in this information to identify the case:

Debtor name Advanced Vascular Resource of Johnstown, LLC
 United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA
 Case number (if known): _____

Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders 12/15

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

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, and government contracts) | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|---|--|---|--|--|---|-----------------|
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| Bayer Healthcare P.O. Box 360172 Pittsburgh, PA 15251-6172 | | Business Debt | Unliquidated | | | \$1,639.89 |
| Blank Rome, LLP One Logan Square 130 North 18th Street Philadelphia, PA 19103-6998 | | Business Debt | Unliquidated | | | \$498,015.36 |
| Braun P.O. Box 512437 Philadelphia, PA 19175-2437 | | Business Debt | Unliquidated | | | \$1,710.00 |
| J&J/Cordis Johnson & Johnson Healthcare Systems 425 Hoes Lane P.O. Box 6800 Piscataway, NJ 08855-6800 | | Business Debt | Unliquidated | | | \$28,056.32 |
| Johnstown Construction Services, LLC 124 Donald Lane Johnstown, PA 15904 | | Business Debt | Unliquidated | | | \$33,364.20 |
| Kol Bio Medical Instruments, Inc. P.O. Box 3000 Glen Allen, VA 23058-3000 | | Business Debt | Unliquidated | | | \$1,060.64 |
| Mindray DS USA, Inc. 24312 Network Place Chicago, IL 60673-1243 | | Business Debt | Unliquidated | | | \$18,862.08 |

Debtor Advanced Vascular Resource of Johnstown, LLC
Name

Case number (if known) _____

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|---|--|---|--|--|---|-----------------|
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| OEC Medical Systems Inc. 2984 Collections Center Drive | | Business Debt | Unliquidated | | | \$3,147.25 |
| Samir Hadeed Johnstown Heart & Vascular Center, Inc. 1027 Broad Street Johnstown, PA 15906 | | Business Debt | Unliquidated | | | \$0.00 |
| Soma Technology Inc. 166 Highland Park Drive Bloomfield, CT 06002 | | Business Debt | Unliquidated | | | \$24,983.88 |
| Washington Cardiovascular Institute, LLC 7610 Carroll Avenue, Suite 100 Takoma Park, MD 20912 | | Business Debt | Unliquidated | | | \$251,585.61 |

NO ADDITIONAL CREDITORS

**United States Bankruptcy Court
Western District of Pennsylvania**

In re Advanced Vascular Resource of Johnstown, LLC

Debtor(s)

Case No.
Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: November 21, 2017

/s/ Mubashar A. Choudry

Mubashar A. Choudry/President
Signer/Title

Bayer Healthcare
P.O. Box 360172
Pittsburgh, PA 15251-6172

Blank Rome, LLP
One Logan Square
130 North 18th Street
Philadelphia, PA 19103-6998

Braun
P.O. Box 512437
Philadelphia, PA 19175-2437

J&J/Cordis
Johnson & Johnson Healthcare Systems
425 Hoes Lane
P.O. Box 6800
Piscataway, NJ 08855-6800

Johnstown Construction Services, LLC
124 Donald Lane
Johnstown, PA 15904

Kol Bio Medical Instruments, Inc.
P.O. Box 3000
Glen Allen, VA 23058-3000

Mindray DS USA, Inc.
24312 Network Place
Chicago, IL 60673-1243

OEC Medical Systems Inc.
2984 Collections Center Drive

Samir Hadeed
Johnstown Heart & Vascular Center, Inc.
1027 Broad Street
Johnstown, PA 15906

Soma Technology Inc.
166 Highland Park Drive
Bloomfield, CT 06002

Washington Cardiovascular Institute, LLC
7610 Carroll Avenue, Suite 100
Takoma Park, MD 20912