Request for Payment of Department of Revenue Taxes

R 01/07

(Bankruptcy Code Cases - Administrative Claims)
DEPARTMENT OF REVENUE/STATE OF FLORIDA

Bankruptcy No	3 07-BK-09024
Type of Bankruptcy Proceeding	11
Date of Petition	12/06/2007
Tax Number	0000038304
Social Security Number	
Employer Identification Number	63-1008786

United States District Court for the MIDDLE NASHVILLE
District of TENNESSEE

SOFA EXPRESS INC
4600 S HAMILTON RD
GROVEPORT OH 43125

1 The undersigned whose business address is Post Office Box 6668 Tallahassee Florida 32314 6668 is the agent of the agent of Department of Revenue and is authorized to make this claim on behalf of the State of Florida
2 Request is made for payment of taxes and any interest and penalty due the Department of Revenue State of Florida as shown below
3 The grounds for the liability is for taxes interest and penalty due under the Revenue Laws of the State of Florida

ADMINISTRATIVE CLAIMS CODE s 503

Kind of Tax	Tax Due	Accured Interest To Date	Accured Penalty To Date	Balance Due
SALES AND USE TAX	7,540 34	254 56	0 00	7,794 90

FILED
JUN 13 2008
BMC

Returned Item Check Fee 0 00

Total amount due as of date of this request **7,794 90**

Claimants reserve the right to amend if claim is based on estimated amounts of tax due or is otherwise subject to more accurate dertermination

Penalty for Presenting Fradulent Claim Fine of not more than $5000 or imprisonment for not more than 5 years or both Title 18 U S C Sec 152	**Signature** Michelle Kennedy	**Date** 06/10/2008
	Title MICHELLE KENNEDY REVENUE SPECIALIST	**Phone**
Claim Comment Text		

See Attached Summary Sheet

CLAIMANTS ATTORNEY
FREDERICK F RUDZIK
P O BOX 6668
TALLAHASSEE FL 32314-6668

Sofa Express Inc
00538

FLORIDA DEPARTMENT OF REVENUE

Legal Claims Summary Sheet Administrative Claims

DR-88B
R 07/01

☒ New Case
☐ Prior Case

Out-of-State Case Code

Taxpayer s Name SOFA EXPRESS INC	Location of Court MIDDLE NASHVILLE TENNESSEE
Business Name SOFA EXPRESS INC	Bankruptcy Case Number 3 07-BK-09024
Address 4600 S HAMILTON RD	Chapter Number 11 / Petition Date 12/06/2007
City GROVEPORT OH 43125	Account Number 0000038304
Tax Type SALES AND USE TAX	Date Business Close/Date Converted

Period Due	Tax Amount	Document Type	Contract Object	R Itm/Court Fees	Penalty	Interest	Warrant Number
12/07	4 172 84	Bill	12898234	0 00	0 00	206 98	
03/08	3 367 50	Bill	13407030	0 00	0 00	47 58	

TOTAL TAX $ 7 540 34 PENALTY $ 0 00 INTEREST $ 254 56

☐ Amended Claim
Supersedes claim for $ 0 00

Dated

Adj $ 0 00

Court Costs/Sheriff Fee $ 0 00
Returned Check Fee $ 0 00
Total of Claim 7 794 90
Daily Interest $

Trustee s Name

Trustee s Address

City State Zip

Boult, Cummings, William Norton III
Attorney's Name

1600 Division Street, Ste 700
Attorney s Address

NASHVILLE TN 37303
City State Zip

615 252 2397
Attorney's Phone No

Date Prepared 06/10/2008 Prepared By MK P& I Figured to 06/10/2008

FLORIDA
DEPARTMENT OF REVENUE

Lisa Echeverri
Executive Director

STATE OF FLORIDA

DEPARTMENT OF REVENUE

Bankruptcy Section – Office of General Counsel
P O Box 6668
Tallahassee Florida 32399-6668
(850) 922 9887

General Tax Administration
Child Support Enforcement
Property Tax Administration
Administrative Services
Information Services

June 10, 2008

DEAR CLAIMS AGENT

PLEASE ACKNOWLEDGE RECEIPT OF REQUEST FOR PAYMENT IN THE AMOUNT OF **$7,794 90**, CLAIM DATED **06/10/08** FOR DEPARTMENT OF REVENUE TAXES BY STAMPING COPY OF CLAIM AND RETURNING IN POSTAGE PAID SELF-ADDRESSED ENVELOPE

PLEASE INCLUDE CLAIM NUMBER FOR OUR REFERENCE

THANK YOU,

Michelle Kennedy

MICHELLE KENNEDY, REVENUE SPECIALIST III
STATE OF FLORIDA, DEPARTMENT OF REVENUE
BANKRUPTCY SECTION
POST OFFICE BOX 6668
TALLAHASSEE, FLORIDA 32314-6668