

UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF DELAWARE

PROOF OF CLAIM

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NOV 29 2010

MARK D. COLLINS

In re (Name of Debtor):

URBAN BRANDS INC

Case Number:

10-13005

Chapter # 11

NOTE: This form should be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C 503.

Name of the Creditor:

FULTON COUNTY TAX COMMISSIONER

Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Check box if you have never received any notices from the bankruptcy court in this case.

Check box if this address differs from the address on the envelope sent to you by the court.

Name and Address where Notices Should be Sent:

141 PRYOR ST SUITE 1113
ATLANTA, GA 30303

Telephone Number: (404) 730-6100

THIS SPACE IS FOR
COURT USE ONLY

Account or other number by which creditor identifies debtor:
P20080000029, P00006020159, P00005459942 et al

Check here if this claim replaces a previously filed claim dated: _____
 amends

1. BASIS FOR CLAIM:

- Goods Sold
- Services Performed
- Money Loaned
- Personal Injury/Wrongful Death
- Taxes
- Other

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BMC GROUP

- Retiree benefits as defined in 11 U.S.C. 1114(a)
- Wages, salaries, and compensation (Fill out below)
Your SS#: _____
Unpaid compensation for services performed
from _____ to _____
(Date) (Date)

2. DATE DEBT WAS INCURRED:

2008-2010

3. IF COURT JUDGEMENT, DATE OBTAINED:

4. CLASSIFICATION OF CLAIM: Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured priority, (3) Secured. It is possible for part of a claim to be in one category and part in another.

CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED.

SECURED CLAIM \$0.00
Attach evidence of perfection of security interest
Brief description of Collateral:
 Real Estate Motor Vehicle Other: _____

Value of Collateral: \$ 0.00
Amount of arrearage and other charges at time case filed included in secured claim above, if any \$0.00

UNSECURED NONPRIORITY CLAIM
A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.

UNSECURED PRIORITY CLAIM \$6,646.13
 Specify the priority of the claim:
Wages, salaries, or commissions (up to \$4650* earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier) - 11 U.S.C. 507(A) (3).
 Contributions to an employee benefit plan - 11 U.S.C. 507(A) (4).
 Up to \$2100* of deposits toward purchase, lease, or rental of property or services for personal, family or household use 11 U.S.C. 507(a) (6).
 Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. 507(a) (7).
 Taxes or penalties of governmental units - 11 U.S.C. 507(a).
 Other - Specify applicable paragraph of 11 U.S.C. 507(a) _____

*Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

5. TOTAL AMOUNT OF CLAIM AT TIME CASE FILED:

\$0.00	\$0.00	\$6,646.13 (est.)	\$6,646.13
(Unsecured)	(Secured)	(Priority)	(Total)

Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

6. CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.

7. SUPPORTING DOCUMENTS: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgements, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.

8. TIME-STAMPED COPY: To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

Date: Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any)

NOV 18, 2010

Kimberly Lome

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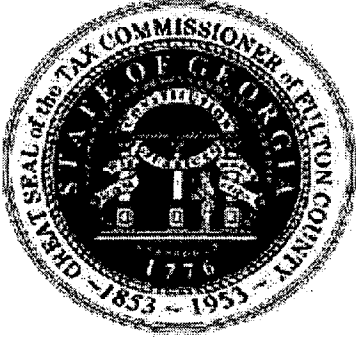
Urban Brands



00175

ADDITIONAL PARCELS

P20070001956



PARID: P20080000029

ADDRESS: 6175 OLD NATIONAL HWY STE 160

ROLL: RE

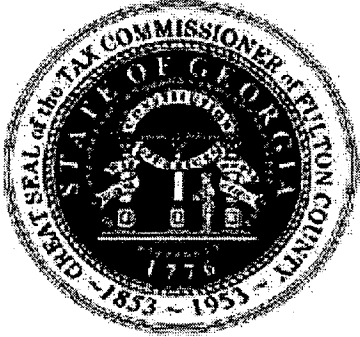
**NAME: LARGE APPAREL OF
GEORGIA**

5800 WINDMILL LANE, SUITE 100, ALPHARETTA, GA 30201

Tax Year	Cycle	Taxes
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2010	FUL	\$ 2,418.60
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TOTAL	\$ 2,418.60
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PARID: P0006020159

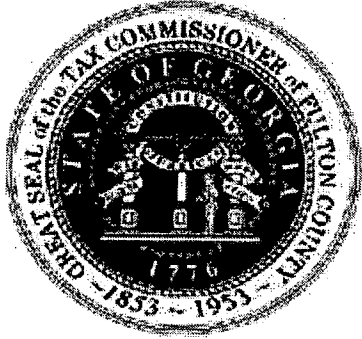
ADDRESS: 2841 GREENBRIAR PKWY

ROLL: RE

**NAME: LARGE APPAREL OF
GEORGIA**



Tax Year	Cycle	Taxes
2010	ATL	\$ 734.24
2010	FUL	\$ 229.89
TOTAL		\$ 964.13



PARID: P00005459942

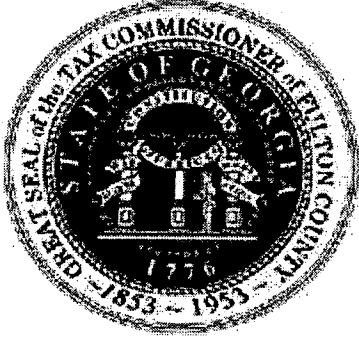
ADDRESS: 805 RALPH D ABERNATHY BLVD

ROLL: RE

**NAME: LARGE APPAREL OF
GEORGIA**



Tax Year	Cycle	Taxes
2008	ATL	\$ 34.05
2010	ATL	\$ 1,236.05
2010	FUL	\$ 387.02
	TOTAL	\$ 1,657.12



PARID: P20070001956
ADDRESS: 3755 CARMIA DR

ROLL: RE

**NAME: LARGE APPAREL OF
GEORGIA**



Tax Year	Cycle	Taxes
2010	ATL	\$ 1,223.27
2010	FUL	\$ 383.01
TOTAL		\$ 1606.28