

UNITED STATES BANKRUPTCY COURT DISTRICT OF DELAWARE

PROOF OF CLAIM

Name of Debtor: Urban Brands, Inc., et al.

Case Number: 10-13005-KJC

NOTE: This form should not 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 Creditor (the person or other entity to whom the debtor owes money or property): Pinellas County, Florida Tax Collector

Check this box to indicate that this claim amends a previously filed claim.

Name and address where notices should be sent: Robin Ferguson, CFCA, Tax Manager, Pinellas County Tax Collector, P O Box 10834, Clearwater, FL 33757-8834, Telephone number: (727) 464-3386

RECEIVED AUG 11 2011 BMC GROUP

Court Claim Number: (If known)

Filed on:

Name and address where payment should be sent (if different from above):

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

Telephone number:

Check this box if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$ 3,789.93

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

Specify the priority of the claim.

2. Basis for Claim: Tax plus 18% interest per annum (See instruction #2 on reverse side.)

Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

3. Last four digits of any number by which creditor identifies debtor: 3678

Wages, salaries, or commissions (up to \$11,725\*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507 (a)(4).

3a. Debtor may have scheduled account as: (See instruction #3a on reverse side.)

Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).

4. Secured Claim (See instruction #4 on reverse side.)

Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff: Real Estate Motor Vehicle Other (checked) Describe: 2010 Tangible Personal Property Tax

Value of Property: \$ 200,551.00 Annual Interest Rate 18%

Amount of arrearage and other charges as of time case filed included in secured claim,

if any: \$ 179.47 Basis for perfection: FL Statutes 192, 197

Amount of Secured Claim: \$ 3,789.93 Amount Unsecured: \$

Up to \$2,600\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).

Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

Other - Specify applicable paragraph of 11 U.S.C. §507 (a)( ).

7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)

Amount entitled to priority:

\$

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

\*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

Date: June 8, 2011

Signature: The person filing this claim must sign it. Sign and print name and title, other person authorized to file this claim and state address and telephone number if address above. Attach copy of power of attorney, if any.

Robin Ferguson, CFCA, Tax Manager



FOR COURT USE ONLY

28 PM 12:29

BMC

**DIANE NELSON, CFC** NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS  
 PINELLAS COUNTY TAX COLLECTOR www.taxcollect.com **2010 DELINQUENT TANGIBLE TAX**  
 PAY IN U.S. FUNDS TODIANE NELSON, TAX COLLECTOR • P.O. BOX 10832 • CLEARWATER, FL 33757-8832 • (727) 464-7777

WARRANT #10-0063	If Received By Please Pay	Jun 30, 2011 \$3,789.93	Jul 29, 2011 \$3,844.09	Aug 31, 2011 \$3,898.24	
---------------------	------------------------------	----------------------------	----------------------------	----------------------------	--

ACCOUNT NUMBER	ESCROW CODE	MILLAGE CODE
T812731		SP.

SITE ADDRESS: 3295 CENTRAL AVE. 33713

ASHLEY STEWART  
 LARGE APPAREL OF FLORIDA INC  
 100 METRO WAY  
 SECAUCUS, NJ 07094-1914

**COPY**

Bankrupt

AD VALOREM TAXES						
TAXING AUTHORITY	MILLAGE RATE	ASSESSED VALUE	EXEMPTION	TAXABLE VALUE	TAXES LEVIED	
GENERAL FUND	4.8108	200,551	25,000	175,551	844.54	
HEALTH DEPARTMENT	0.0622	200,551	25,000	175,551	10.92	
SCHOOL-STATE LAW	5.3420	200,551	25,000	175,551	937.79	
SCHOOL-LOCAL BD.	2.9980	200,551	25,000	175,551	526.30	
ST PETERSBURG	5.9125	200,551	25,000	175,551	1,037.95	
SW FLA WTR MGMT.	0.3770	200,551	25,000	175,551	66.18	
PINELLAS ANCLOTE	0.2600	200,551	25,000	175,551	45.64	
PINELLAS COUNTY PLN.CNCL.	0.0125	200,551	25,000	175,551	2.19	
JUVENILE WELFARE BOARD	0.7915	200,551	25,000	175,551	138.95	
TOTAL MILLAGE	20.5665					

TAXES BECOME DELINQUENT APRIL 1st	TOTAL GROSS TAXES AND LATE/NON-RETURN PENALTY	\$3,610.46
-----------------------------------	---	------------

PLEASE RETAIN TOP PORTION FOR YOUR RECORDS

**DIANE NELSON, CFC** NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS  
 PINELLAS COUNTY TAX COLLECTOR www.taxcollect.com **2010 DELINQUENT TANGIBLE TAX**  
 PAY IN U.S. FUNDS TODIANE NELSON, TAX COLLECTOR • P.O. BOX 10832 • CLEARWATER, FL 33757-8832 • (727) 464-7777

WARRANT #10-0063	If Received By Please Pay	Jun 30, 2011 \$3,789.93	Jul 29, 2011 \$3,844.09	Aug 31, 2011 \$3,898.24	
---------------------	------------------------------	----------------------------	----------------------------	----------------------------	--

ACCOUNT NUMBER	ESCROW CODE	MILLAGE CODE
T812731		SP.

SITE ADDRESS: 3295 CENTRAL AVE. 33713

ASHLEY STEWART  
 LARGE APPAREL OF FLORIDA INC  
 100 METRO WAY  
 SECAUCUS, NJ 07094-1914

Bankrupt