

Fill in this information to identify the case:

Debtor 1 **CBC RESTAURANT CORP.**Debtor 2
(Spouse, if filing)United States Bankruptcy Court for the: **District of DE**Case number **23-10245 - Chapter 11**

- ☒ Date Stamped Copy Returned
☐ No self addressed stamped envelope
☐ No copy to return

Official Form 410

Proof of Claim

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both 18 U. S. C §§ 152, 157 and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Hidalgo County</u> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? LINEBARGER GOGGAN BLAIR & SAMPSON, LLP PO BOX 17428 AUSTIN, TX 78760-7428 (512) 447-6675 austin.bankruptcy@lgbs.com Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	Where should payments to the creditor be sent? (If different) HIDALGO COUNTY C/O DIANE W. SANDERS LINEBARGER GOGGAN BLAIR & SAMPSON, LLP P.O. BOX 17428 AUSTIN, TX 78760
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Claim number on court claims registry (if known) _____ Filed On: _____	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Who made the earlier filing? _____	



Part 2: Give Information About the Claim as of the Date the Case Was Filed

MAR 15 2023

6. Do you have any number you use to	<input type="checkbox"/> No
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KURTZMAN CARSON CONSULTANTS



<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____ <input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____ <input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)() that applies. \$ _____
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* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box

- ☐ I am the creditor.
☒ I am the creditor's attorney or authorized agent.
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
☐ I am a guarantor, surety, endorser, or other co-debtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* 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 date February 27, 2023

Diane Sanders

Print the name of the person who is completing and signing this claim:

Name : **Diane W. Sanders**

Title : **Attorney TXBN 16415500**

Company : **LINEBARGER GOGGAN BLAIR & SAMPSON, LLP**
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address : **PO BOX 17428
AUSTIN, TX 78760-7428
(512) 447-6675**

austin.bankruptcy@lgbs.com

RECEIVED

MAR 15 2023

KURTZMAN CARSON CONSULTANTS

LINEBARGER GOGGAN BLAIR & SAMPSON, LLP

ATTORNEYS AT LAW
P.O. BOX 17428
AUSTIN, TEXAS 78760

512/447-6675
FAX 512/443-5114

Diane W. Sanders

March 2, 2023

TO BANKRUPTCY CLAIMS AGENT.

Dear Sir or Madam:

Attached please find the original and one copy of documents for this case. Please file stamp these documents and return the copy in the enclosed self addressed stamped envelope.

Sincerely,



Francisco Maldonado
Legal Assistant

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE**

IN RE:	§	
	§	CASE NO. 23-10245
CBC RESTAURANT CORP.	§	
	§	
DEBTOR	§	CHAPTER 11
	§	

HIDALGO COUNTY
PROOF OF CLAIM SUMMARY OF EXHIBITS

<u>Exhibit No.</u>	<u>Account No.</u>	<u>Tax Years included in Claim</u>	<u>Amount Due</u>
1	M207599000001A03	2022-2023 EST	\$14,435.71
2	N7200990000001C3	2022-2023 EST	\$7,025.11
TOTAL:			\$21,460.82

DELINQUENT TAX STATEMENT SUMMARY



PABLO (PAUL) VILLARREAL JR., PCC
HIDALGO COUNTY TAX ASSESSOR - COLLECTOR
PO BOX 178
EDINBURG, TEXAS 78540
(956) 318-2157

Certified Owner:

CORNER BAKERY CAFE #1609
CB CAFES MCALLEN I LLC
4021 N 10TH ST STE G4
MCALLEN, TX 78504-3002

Legal Description:

INVENTORY SUPPLIES FURNITURE FIXTURES &
EQUIPMENT AT 3400 W EXPWY 83 STE 780 /
NEW ACCT 2016

Account No: M2075-99-000-001A-03

2022 Value: \$348,689
Appr. Dist. No.: 1017646

Legal Acres: .0000

Parcel Address: 3400 W INTERSTATE HWY 2 STE

As of Date: 02/22/2023

Print Date: 02/24/2023 Printed By: LGBSFRANCIS

Year	Tax Units	Remaining Levy	IF PAID BY February 28, 2023		IF PAID BY March 31, 2023		IF PAID BY May 1, 2023	
			Penalty Interest	Total	Penalty Interest	Total	Penalty Interest	Total
2022	1 2 47 54 55	\$6,973.77	\$488.17	\$7,461.94	\$627.64	\$7,601.41	\$1,834.48	\$8,808.25

TOTAL AMOUNT DUE: \$6,973.77 \$488.17 \$7,461.94 \$627.64 \$7,601.41 \$1,834.48 \$8,808.25

Tax Unit Codes:

1 HIDALGO COUNTY 2 DRAIN DIST #1 47 MCALLEN ISD 54 SOUTH TEXAS ISD 55 SOUTH TEXAS COLLEGE

VISIT OUR WEBSITE TO PAY ONLINE OR INQUIRE ON YOUR PROPERTY AT WWW.HIDALGOCOUNTYTAX.ORG

IF THE PROPERTY DESCRIBED IN THIS DOCUMENT IS YOUR RESIDENCE HOMESTEAD, YOU SHOULD CONTACT THE TAX COLLECTOR FOR THE HIDALGO COUNTY TAX OFFICE REGARDING A RIGHT YOU MAY HAVE TO ENTER INTO AN INSTALLMENT AGREEMENT DIRECTLY WITH THE TAX COLLECTOR FOR THE HIDALGO COUNTY TAX OFFICE FOR THE PAYMENT OF THESE TAXES.

THE TAXES ON THIS PROPERTY ARE DELINQUENT. THE PROPERTY IS SUBJECT TO A LIEN FOR THE DELINQUENT TAXES. IF THE DELINQUENT TAXES ARE NOT PAID, THE LIEN MAY BE FORECLOSED.

PLEASE CUT AT THE DOTTED LINE AND RETURN THIS PORTION WITH YOUR PAYMENT

Print Date: 02/24/2023

Appr. Dist. No.: 1017646

PLEASE NOTE YOUR ACCOUNT NUMBER ON YOUR CHECK AND MAKE PAYABLE TO:

PABLO (PAUL) VILLARREAL JR., PCC
HIDALGO COUNTY TAX ASSESSOR - COLLECTOR
PO BOX 178
EDINBURG, TEXAS 78540



ESTIMATED 2023 TAXES:

\$6,973.77

ACCOUNT TOTAL:

\$14,435.71

M2075-99-000-001A-03

CORNER BAKERY CAFE #1609
CB CAFES MCALLEN I LLC
4021 N 10TH ST STE G4
MCALLEN, TX 78504-3002

If Paid By	Amount Due
February 28, 2023	\$7,461.94
March 31, 2023	\$7,601.41
May 1, 2023	\$8,808.25
Amount Paid:	\$

EXHIBIT

00010176460000746194

Page 1 of 1

DELINQUENT TAX STATEMENT SUMMARY



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HIDALGO COUNTY TAX ASSESSOR - COLLECTOR
 PO BOX 178
 EDINBURG, TEXAS 78540
 (956) 318-2157

Certified Owner:

CORNER BAKERY
CB CAFES MCALLEN I LLC
 4021 N 10TH ST STE C4
 MCALLEN, TX 78504-3002

Legal Description:

INVENTORY SUPPLIES FURNITURE FIXTURES
 EQUIPMENT & VEHICLES AT 4021 N 10TH STE
 C4/ NEW ACCT 2013

Account No: N7200-99-000-0001-C3

2022 Value: \$169,689
Appr. Dist. No.: 843915

Legal Acres: .0000

Parcel Address: 4021 N 10TH ST STE-C4

As of Date: 02/24/2023

Print Date: 02/24/2023 Printed By: LGBSFRANCIS

Year	Tax Units	Remaining Levy	IF PAID BY February 28, 2023		IF PAID BY March 31, 2023		IF PAID BY May 1, 2023	
			Penalty Interest	Total	Penalty Interest	Total	Penalty Interest	Total
2022	1 2 47 54 55	\$3,393.78	\$237.55	\$3,631.33	\$305.43	\$3,699.21	\$892.76	\$4,286.54

TOTAL AMOUNT DUE: \$3,393.78 \$237.55 \$3,631.33 \$305.43 \$3,699.21 \$892.76 \$4,286.54

Tax Unit Codes:

1 HIDALGO COUNTY 2 DRAIN DIST #1 47 MCALLEN ISD 54 SOUTH TEXAS ISD 55 SOUTH TEXAS COLLEGE

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PLEASE CUT AT THE DOTTED LINE AND RETURN THIS PORTION WITH YOUR PAYMENT

Print Date: 02/24/2023

Appr. Dist. No.: 843915

PLEASE NOTE YOUR ACCOUNT NUMBER ON YOUR CHECK AND MAKE PAYABLE TO:

PABLO (PAUL) VILLARREAL JR., PCC
HIDALGO COUNTY TAX ASSESSOR - COLLECTOR
 PO BOX 178
 EDINBURG, TEXAS 78540



ESTIMATED 2023 TAXES:

\$ 3,393.78

ACCOUNT TOTAL:

\$ 7,025.11

N7200-99-000-0001-C3

CORNER BAKERY
CB CAFES MCALLEN I LLC
 4021 N 10TH ST STE C4
 MCALLEN, TX 78504-3002

If Paid By	Amount Due
February 28, 2023	\$3,631.33
March 31, 2023	\$3,699.21
May 1, 2023	\$4,286.54
Amount Paid:	\$

EXHIBIT

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Page

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of

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