EXHIBIT "41"

1 30 - 20

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT O	F NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED	
NOTE: Do not use this form to make a claim for an administrative expense that aris expense according to $11U.S.C.9503$.	es after the bankruptcy filing. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Dungbin Zhang	Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent: Dongbin Zhang	(f brown) (Sty Group)
17 Tioga Pl. Irvine, CA 92602	Filed on: APR 1 3 2015
Telephone number: 949-459-7840 Email address: donzhang 5555 @yahus . 60 m 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
Near an anness where payment should be sent (it different from active).	this daim. Attach copy of statement giving particulars.
	FILED - 00152
	District of Nevada Ameri-Dream, LLC
Telephone number: Email address:	National Color, ELC.
1. Amount of Claim as of Date Case Filed: \$ \$ 1,675.9	
If all or part of the claim is secured, complete item 4.	
If all or part of the claim is entitled to priority, complete item 5.	
	he principal amount of the claim. Attach a statement that itemizes interest or charges.
	-deposit, Key / pet/ Cleaning deposit, Last munith re
	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
8 6 0 0	Dony bin Zhanny
4. Secured Claim (See instruction #4)	(See instruction #36) (See instruction #36)
Check the appropriate box if the claim is secured by a lien on property or a rigi attach required reducted documents, and provide the requested information.	Amount of arrearage and other charges, as of the time case it of setoff, was filed, included in secured claim, if any:
	tor Vehicle
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: 5
Annual Interest Rate % D Foxed or D Va (when case was filed)	fable Amount Unsecured: \$
the priority and state the amount.	t of the claim falls into one of the following categories, check the bux specifying
11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) carned within 180.	ans (up to Contributions to an employee benefit days before plan – 11 U.S.C. § 507 (a)(5). or s
A Up to \$2,775* of deposits toward business censed, whichever is	earlier - Other - Specify applicable puragraph Amount entitled to priority:
services for personal, family, or household use = 11 U.S.C. § 507 (a)(7). ☐ Thors or penalties owed to governmental units = 11 U.S.C. \$07 (a)(8).	\$ 10/3.00
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with	
Credits. The amount of all payments on this claim has been credited for the pur	pose of making this proof of claim. (See instruction #6)

EXHIBIT "42"

DESIRE	DESCRIPTION OF THE PARTY NAMED IN	ence.	ST 11	92	12	nice.	OF RE
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141210	1300-200	ш	83333	34	35	2/10	12.85

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	T OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE	ED
NOTE: Do not use this form to make a claim for an administrative expense that a expense according to 11 U.S.C. § 503.	arises after the bankruptcy filling. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): A I HO N G Name and address where notices should be sent:	Check this box to indicate that this claim amends a previously filed claim. Court Claim Number:
LAI HO NG 4592 TIBALCOVE CT. LAS VEGAS, NV 89147	Filed on: APR - 3 2015
Telephone number: 702-217-8790 Email address: LEELAI HOHOGHOTMAIL.COM	
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 this claim. Attach copy of statement giving particulars.
Telephone number:	FILED - 00114 District of Nevada
Email address: 1. Amount of Claim as of Date Case Filed: 5 2 800	Ameri-Dream, LLC
If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. Check this box if the claim includes interest or other charges in addition Basis for Claim: SECURITY PEPOSIT HELL (See instruction #2)	n to the principal amount of the claim. Attach a statement that itemizes interest or charges. D. BY. HMERJ-DREAM REALTY (SOL ATT, 1)
3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled secount as: 3b. Uniform Claim Identifier (optional):
□ Other	
	Amount of Secured Claim: S
(when case was filed) 5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any the priority and state the amount. □ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(B). □ Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507 (a)(7). □ Taxen or penalties owed ignoremental units - 11 to 507 (a)(8). *Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter.	180 days before plan - 11 U.S.C. § 507 (a)(5). Debtor's ver is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_) Substitute of 12 U.S.C. § 507 (a)(_)
Credits. The amount of all payments on this claim has been credited for the	the purpose of making this proof of claim. (See instruction #6) Modified B10 (GCG) (4/13

EXHIBIT "43"

	I MESAN A TABAS NAVA (SE) E SERBAR MEN AM A LA LA DA UN DE
UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT O	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED	
NOTE: Do not use this form to make a claim for an administrative expense that aris expense occording to 11 U.S.C. § 503.	ses ofter the bankruptcy fling. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes maney or property): VICTOR DIEU	☐ Check this box to indicate that this claim amends a previously filed claim. Court Claim Number:
Name and address where notices should be sent:	Court Carm (Vanior).
VICTOR DIEU 4592 TIDAL COVE CT.	Filed on:
	APR - 3 2015
LAS VEGAS, NV 89147.	. ()
Telephone Number: 702 - 218 - 7174 Email address: VICTORBDIEU DYAHOO, COM	
	Check this box if you are aware that anyone else has filed a proof of claim relating to
Name and address where payment should be sent (if different from above):	this daim. Attach copy of statement giving particulars.
	FILED - 00115
The beautiful of the second of	District of Nevada
Telephone number: Email address:	Ameri-Dream, LLC
1. Amount of Claim as of Date Case Filed: S 780	
If all or part of the claim is secured, complete item 4.	
If all or part of the claim is entitled to priority, complete item 5.	
Check this box if the claim includes interest or other charges in addition to	the principal amount of the claim. Attach a statement that itemizes interest or charges.
2. Basis for Claim: SCCURITY DEPOSIT FROM T (See instruction #2)	ENANT ON 9486 VASTVALLEY ST.
	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
2 2 1 1	account as:
3254	(C)
4. Secured Claim (See instruction #4)	(See instruction #3a) (See instruction #3b) Amount of arrearage and other charges, as of the time case
Check the appropriate box if the claim is secured by a lien on property or a rig attach required reducted documents, and provide the requested information.	ght of setoff, was filed, included in secured claim, if any:
	fotor Vehicle
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: \$
Annual Interest Rate% D Fixed or D V (when case was filed)	Amount Unsecured: \$ 1780/
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any pa the priority and state the amount. 	art of the claim falls into one of the following categories, check the box specifying
☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Uwages, salaries, or commiss 512,475*) earned within 18 the case was filed or the Del	is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_).
507 (a)(8).	
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter wi	ith respect to cases commenced on or after the date of adjustment.

EXHIBIT "44"

	I REPORT I FORM THE ACT OF BUILDING HE AT I CENTED
UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED	D
NOTE: Do not use this form to make a claim for an administrative expense that an expense according to 11 U.S.C. § 503.	ises after the bankruptcy filing. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or	☐ Check this box to indicate that this claim amends a previously filed claim.
property): ZHENGHAO ZHANG	Court Claim Number:
Name and address where notices should be sent:	
ZHENGHAO ZHANG	(if known) (ith Group,
18 Prosa,	Filed on:
Irvine, CA 92620	APR - 4 2015
FIG. 516 - 8181	
Telephone number: 510-565 - 8186 Email address: ZHANG ZHH @ YAHDO COM	
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
	this claim. Attach copy of statement giving particulars.
	FILED - 00116
	District of Nevada
Telephone number: Email address:	Ameri-Dream, LLC
Amount of Claim as of Date Case Filed: \$ 2, 00.00	
If all or part of the claim is secured, complete item 4.	
If all or part of the claim is entitled to priority, complete item 5.	
	Annihila anni d'Andria Araba antoni del Andria
Various (5-1)	o the principal amount of the claim, Attach a statement that itemizes interest or charges.
2. Basis for Claim: See Introduced Lease Asserte	held in the trust (Security, key, Pet, Clarning deposit
	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
1 4 3 4	ACCOUNT AS: PHENGHAN ZHANG
<u> </u>	210-01-70 2-7-0
Secured Claim (See instruction #4)	(See instruction #3n) (See instruction #3b) Amount of arrearage and other charges, as of the time case
Check the appropriate box if the claim is secured by a lien on property or a ri	
attach required reducted documents, and provide the requested information.	s
Nature of property or right of setoff:	Motor Vehicle Basis for perfection:
Describe:	
Value of Property: S	Amount of Secured Claim: S
Annual Interest Rate% D Fixed or D V (when case was filed)	Variable Amount Unsecured: \$,2,100.00
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any pette priority and state the amount. 	art of the claim falls into one of the following categories, check the box specifying
	ssions (up to Contributions to an employee benefit 80 days before plan = 11 U.S.C. § 507 (a)(5).
	r is earlier - Other - Specify applicable paragraph Amount entitled to priority:
services for personal, family, or	\$ 2,100.00
governmental units - 11 U.S.C. g 307 (a)(7).	
507 (n)(8).	ish named to come commenced on an other the first of a first own
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w 6. Credits. The amount of all payments on this claim has been credited for the p	
Orealts The amount of an payments on this claim has seen erective for the	Modified B10 (GCG) (4/13

EXHIBIT "45"

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PROC	F OF CL	AIM	

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED	
NOTE: Do not use this form to make a claim for an administrative expense that are	ises after the bankruptcy filing. You may file a request for payment of an administrative
expense occording to 11 U.S.C. § 503.	
Name of Creditor (the person or other entity to whom the Debtor owes maney or property):	Check this box to indicate that this claim amends a previously filed claim.
KNOWE VA TIO	Court Claim Number:
Name and address where notices should be sent:	(If buown)
KUONG VA HO 5300 CARRINGE HILL RD. NE	(i) prown)
5300 CHRUAGE HILL KD. NE	Filed on:
PRIOR LAKE, MN 553 2	
Not him and	
Telephone number: 612 - 636 - 9399	
Email address: DONHOS/Q ICLOUD. COM	
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 this cleim. Attach copy of statement giving particulars.
	this clerm. Attach copy or statement giving particolars.
	FILED - 00117
	District of Nevada
Telephone number: Email address:	Ameri-Dream, LLC
1. Amount of Claim as of Date Case Filed: \$ 8800/	
If all or part of the claim is secured, complete item 4.	
If all or part of the claim is entitled to priority, complete item 5.	
	A state of the section of the sectio
Check this box if the claim includes interest or other charges in addition to	the principal amount of the claim. Affacts a statement that themizes interest or charges.
2. Basis for Claim SICURITY DEVOSIT + RUSE	EVE HELD DY MMEKI-BRUMN, KEHLIY
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 3a	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
A C O O	account as:
1 4289 1	
	(See instruction #3a) (See instruction #3b)
Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ri	Amount of arrearage and other charges, as of the time case ght of setoff, was filed, included in secured claim, if any:
attach required reducted documents, and provide the requested information.	S
	fotor Vehicle
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: S
Annual Interest Rate % D Fixed or D V	Variable 000 5 4
(when case was filed)	Amount Unsecured: 5 3 3 50
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any puthe priority and state the amount. 	art of the claim falls into one of the following categories, check the box specifying
☐ Domestic support obligations under ☐ Wages, salaries, or commis 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). S12,475°) earned within 18	sions (up to Contributions to an employee benefit 0 days before plan - 11 U.S.C. § 507 (a)(5).
the case was filed or the De	btor's
☐ Up to \$2,775* of deposits toward business ceased, whichever purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)().
services for personal, family, or household use - 11 U.S.C. 5 507 (a)(7).	\$ \$890 1
governmental units - 11 U.5 507 (a)(8).	S.C. §
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	ith respect to cases commenced on or after the date of adjustment
6. Credits. The amount of all payments on this claim has been credited for the	
	14 PF 4 B10 PF (1811

EXHIBIT "46"

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CAPAR III	1866 BACK RE	ш		-	111 (8) 741	ш
	Maria da Maria					•
100000000000000000000000000000000000000	DEG GARBINA		TM 10			ш
FIGURE 118		ш	e 15. 11.1		1.5 (8) (8)	п
				-		•

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM					
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED						
NOTE: Do not use this form to make a claim for an administrative expense that are expense according to 11 U.S.C. § 503.	ises after the bankruptcy filing. You may file a request for payment of an administrative					
Name of Creditor (the person or other entity to whom the Debtor owes money or property):	☐ Check this box to indicate that this claim amends a previously filed claim.					
Name and address where notices should be sent: 1606 at a Camile Laws 1901 Gille de Espana Las Vegas - NV 89102	Court Claim Number: BK-5-15-10110-LED (1/ known) Filed on: 119/2015 APR-6 2015					
Telephone number: (702) 739-9957 Email address: pleans Inn a mac com						
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 this claim. Attach copy of statement giving particulars.					
	FILED - 00120 District of Nevada Ameri-Dream, LLC					
Telephone number: Ernail address:	American, LLC					
1. Amount of Claim as of Date Case Filed: \$ 375						
If all or part of the claim is secured, complete item 4.						
If all or part of the claim is entitled to priority, complete item 5.						
2. Basis for Claim: Holding Terror tasks (See instruction #2)	o the principal amount of the claim. Attach a statement that itemizes interest or charges. Scounty on Antal Property					
	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):					
	(See instruction #3a) (See instruction #3b)					
 Secured Ctaim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ri attach required reducted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:					
Nature of property or right of setoff:	Actor Vehicle Basis for perfection:					
Value of Property: S	Amount of Secured Claim: \$					
Annual Interest Rate% ☐ Fixed or ☐ N (when case was filed)	/ariable Amount Unsecured: \$					
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p. the priority and state the amount. 	art of the claim falls into one of the following categories, check the box specifying					
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Uwages, salaries, or commis \$12,475*) carned within 18 the case was filed or the De	0 days before plan - 11 U.S.C. § 507 (a)(5). btor's					
business ceased, whichever purchase, tease, 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).	of 11 U.S.C. § 507 (a)().					
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	ith respect to cases commenced on or after the date of adjustment.					

EXHIBIT "47"

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEE	D :
NOTE: Do not use this form to make a claim for an administrative expense that an expense occording to 11 U.S.C. § 503.	rises after the bankruptcy filing. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property):	Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:
Name and address where notices should be sent: 1000 y lamela Lewis 1901 Calle de Espana	BK-5-15-10110-1E12 OF BROWN) WITH GOOD LE
1901 Calle de España	Filed on:
Lai V29a, NV 89102	Filed on: 1/9/2015 APR-6 2015
G02 310-5525	
Telephone number: (702, 310-5525 Email address: plewis Jan Mmac. Com	
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 this claim. Attach copy of statement giving particulars.
	FILED - 00121 District of Nevada
Telephone number:	Ameri-Dream, LLC
Email address: 1. Amount of Claim as of Date Case Filed: S 680	
	_
If all or part of the claim is secured, complete item 4.	
If all or part of the claim is entitled to priority, complete item 5.	
Check this box if the claim includes interest or other charges in addition to	o the principal amount of the claim. Attach a statement that itemizes interest or charges.
2. Basis for Claim: Hading Deport as S (See instruction #2)	eccusty on sental property
3. Last four digits of any number by which creditor identifies debtor: 3a	s. Debtor may have scheduled account as: 3b. Uniform Claim Identifier (optional):
	(See instruction #3a) (See instruction #3b)
Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right attach required reducted documents, and provide the requested information.	Amount of arrearage and other charges, as of the time case
Nature of property or right of setoff: ☐ Real Estate ☐ N	Motor Vehicle
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: 5
Annual Interest Rate	Variable Amount Unsecured: \$
	art of the claim falls into one of the following categories, check the box specifying
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Up to \$2,775° 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).	10 days before plan – 11 U.S.C. § 507 (a)(5). ris earlier – Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(). S_680
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter wi	ith respect to cases commenced on or after the date of adjustment.

EXHIBIT "48"

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- 10	8 6 311	BI H	ш	380 H	
- 111	ши	H H	ш	BH II	191

UNITED STATES BANKRUPTCY CO	URT FOR THE DISTRIC	T OF NEVADA		PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LL				
NOTE: Do not use this form to make a claim for expense according to 11 U.S.C. § 503.	an administrative expense that	arises after the ba	nkruptcy filing. You m	ay file a request for payment of an administrative
Name of Creditor (the person or other entity to v property):	whom the Debtor owes money o			is claim amends a previously filed claim.
Name and address where noticed should be sent	Lewis	BK-5-	-15-10110-L	E Dif known)
Las Vegas, DV			2015	- APR - 6 2015
Telephone number: 602) 310-5 Email address: Plancis and	VA 65.65			\smile
Name and address where payment should be sen			box if you are aware t ach copy of statemen	hat anyone else has filed a proof of claim relating to t giving particulars.
			FII	LED - 00122
				riet of Nevada
Telephone number:			Amer	ri-Dresm, LLC
Email address: 1. Amount of Claim as of Date Case Filed:	\$ 37500			
If all or part of the claim is secured, compliant of the claim is entitled to prior	rity, complete item 5.			
☐ Check this box if the claim includes inte	rest or other charges in addition	to the principal an	mount of the claim. At	tach a statement that itemizes interest or charges.
2. Basis for Claim: Hold Deglo (See instruction #2)	it as securit	you no	t p	reputy
3. Last four digits of any number by which	creditor identifies debtor:	3a. Debtor may account as:	have scheduled	3b. Uniform Claim Identifier (optional):
		(See inst	ruction #3a)	(See instruction #3b)
 Secured Claim (See instruction #4) Check the appropriate box if the claim is seattach required redacted documents, and presents. 			Amount of arrears was filed, included	age and other charges, as of the time case in secured claim, if any:
Nature of property or right of setoff:	☐ Real Estate ☐ Other	Motor Vehicle	Basis for perfectio	a:
Describe:			_	
Value of Property: S	_		Amount of Secure	d Claim: S
Annual Interest Rate	% D Fixed or D	Variable		
 (when case was filed) Amount of Claim Entitled to Priority un the priority and state the amount. 	der 11 U.S.C. § 507 (a). If any	part of the claim	Amount Unsecure	d: 5
☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	☐ Wages, salaries, or comm \$12,475*) earned within		Contributions to an e	
Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or	the case was filed or the business ceased, whichev 11 U.S.C. § 507 (a)(4).	Debtor's ver is earlier – D	Other - Specify appl of 11 U.S.C. § 507 (licable paragraph Amount entitled to priority:
	☐ Taxes or penalties owed:			
household use – 11 U.S.C. § 507 (a)(7).	governmental units – 11 (507 (a)(8).			

EXHIBIT "49"

UNITED STATES BANKRUP	TCY COURT		. г	ROOF OF CLAIM
Name of Debtor.		Case Number:		
Ameri - Dream R	ealty, LLC	BK-S-1.	1 2.9	den City Group (E)
, may file a request for pay	claim for an administrative expense that arises ment of an administrative expense according to	after the bankruptc 11 USC. § 503.		APR - 7 2015
	nuty to whom the debtor owes money or property	/).	\	
HUANHUAN JIN Name and address where notices should			- Church	COURT USE ONLY this box if this claim amer
147 Great Duc	cie street		previous	ly filed claim.
Manchester ~	131FB - UK		(If kno	
+ 44 161 83201 Name and address where payment should			Filed on	
rvame and address where payment should	FILED District o		anyone o	t this box if you are aware to use has filed a proof of claim to this claim. Attach copy of t giving particulars.
Telephone number:	email: Ameri-Dre	1		
1. Amount of Claim as of Date Case I	Filed: \$ 14,220.8			
	nority, complete item 5.	al amount of the cla	im. Attach a statement t	hat itemizes interest or char
	nterest or other charges in addition to the princip	al amount of the cla	im. Attach a statement t	hut itemizes interest or char
Check this box if the claim includes in 2. Basis for Claim:			laim Identifier (option	ıl):
C) Check this box if the claim includes it 2. Basis for Claim: (See instruction #2) 3. Last four digits of any number	nterest or other charges in addition to the princip	3b, Uniform C	Daim Identifier (option	al):
C) Check this box if the claim includes it 2. Basis for Claim: (See instruction #2) 3. Last four digits of any number	Ja. Debtor may have scheduled account as	3b, Uniform C	Daim Identifier (option	ıl):
Check this box if the claim includes in Basis for Claim: (See instruction #2) Last four digits of any number by which creditor identifies debtor: Secured Claim (See instruction #4) Check the appropriate box if the claim is	Ja. Debtor may have scheduled account as	3b, Uniform C	laim Identifier (option n #3b) earage and other char	al):
C) Check this box if the claim includes it 2. Basis for Claim: (See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documents.	3a. Debtor may have scheduled account as (See instruction #3a)	3b, Uniform C	laim Identifier (option n #3b) rearage and other char- tured claim, if any: S	al):
Check this box if the claim includes at 2. Basis for Claim: (See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documer Nature of property or right of setoff:	Ja. Debtor may have scheduled account as (See instruction #3a) secured by a firen on property or a right of its, and provide the requested information.	3b. Uniform C (See instructio Amount of arrincluded in see	laim Identifier (option n 63b) rearuge and other char- cured claim, if any: S	al): ges, as of the time case was
C) Check this box if the claim includes in 2. Basis for Claim: (See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documer Nature of property or right of setoff; Describe: Value of Property: S	Ja. Debtor may have scheduled account as (See instruction #3a) secured by a firen on property or a right of its, and provide the requested information.	3b. Uniform C (See instructio Amount of arr included in see	claim Identifier (option n #3b) rearage and other char- cured claim, if any: S_ rection: cured Claim: S_	al): ges, as of the time case was
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EXHIBIT "50"

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	THE RESERVE OF THE PROPERTY OF			
UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA PROOF OF CLAIM				
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED				
NOTE: Do not use this form to make a claim for an administrative expense that are expense according to 11 U.S.C. § 503.	ises after the bankruptcy filing. You may file a request for payment of an administrative			
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Xiaofan Yang	☐ Check this box to indicate that this claim amends a previously filed claim.			
Name and address where notices should be sent:	Court Claim Number:			
Xiaofan Yang	(If known) City Group			
5 LeBlanc Avenue Montreal, PQ H4K 2C2	Filed on:			
Canada	APR - 7 2015			
	AFR - 7 2013			
Telephone number: (514) 334-4883				
Email address: wzg9588@live.com	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to			
Name and address where payment should be sent (if different from above):	this claim. Attach copy of statement giving particulars.			
•	FILED - 00129			
	District of Nevada			
Telephone number: Email address:	Ameri-Dream, LLC			
1. Amount of Claim as of Date Case Filed: S 1,500				
If all or part of the claim is secured, complete item 4.	_			
If all or part of the claim is entitled to priority, complete item 5.	,			
	the principal amount of the claim. Attach a statement that itemizes interest or charges.			
Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges. Basis for Claim: Security deposit, pet deposit, and cleaning deposit for our rental property located at 7284 Vinca Road, Las Vegas NV 89113				
 Basis for Claim: Security deposit, pet deposit, and cleaning deposit. (See instruction #2) (Please see the attached Lease Agreement, pro 	oos for deposit and Management Agreement)			
	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):			
5 8 8 1				
	(See instruction #3a) (See instruction #3b)			
 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a rig attach required redacted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case ght of setoff, was filed, included in secured claim, if any:			
	fotor Vehicle			
□ Other	Basis for perfection:			
Value of Property: S	Amount of Secured Claim: S			
Annual Interest Rate% ☐ Fixed or ☐ V (when case was filed)	Amount Unsecured: \$			
6. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.				
☐ Domestic support obligations under ☐ Wages, salaries, or commiss				
the case was filed or the Del	11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within 180 days before plan - 11 U.S.C. § 507 (a)(5). the case was filed or the Debtor's Amount entitled to priority:			
© Up to \$2,775* of deposits toward business ceased, whichever purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	of 11 U.S.C. § 507 (a)			
services for personal, family, or household use - 11 U.S.C. § 507 (a)(7).	\$ <u>1,500</u>			
governmental units – 11 U.S. 507 (a)(8).	S.C. §			
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter wi	ith respect to cases commenced on ar after the date of adjustment.			
6. Credits. The amount of all payments on this claim has been credited for the p				
	Modified B10 (GCG) (4/13)			