EXHIBIT "51"



| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT | OF NEVADA PROOF OF CLAIM |
|--|--|
| Name of Debtor: Ameri-Dream Realty. LLC Case No. 15-10110-LEG | D |
| NOTE: Do not use this form to make a claim for an administrative expense that are expense according 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). Ping Ping Ang | |
| Name and address where notices should be sent: Ping Ping Ang | Court Claim Number: |
| 1109 Camelia Dr | [8] |
| Alhambra, CA 91801 | Filed on: (MAY - 4 2015) |
| Telephone number: 626-320-4425 | |
| reteptione number. | · |
| Email address: didiyap@yahoo.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 - 00288 |
| Telephone number | District of Nevada |
| Email address: | Ameri-Dream, LLC |
| Amount of Claim as of Date Case Filed: \$ 2,440.00 | |
| 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. | |
| ☐ Check this box if the claim includes interest or other charges in addition to | to the principal amount of the claim. Attach a statement that itemizes interest or charges. |
| Basis for Claim: Refundable Deposits of 4352 Satin (See instruction #2) Lease Agreement, Management Agreement, Refundable Deposits of 4352 Satin | nwood Dr. Las Vegas NV 89147 (Deposit statement, Deposit Summ |
| | 3a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional): |
| | account as: |
| 8 2 0 0 | (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 rattach required redacted documents, and provide the requested information. | |
| Nature of property or right of setoff: Real Estate Other | Motor Vehicle Basis for perfection: |
| Describe: | |
| Value of Property: S | Amount of Secured Claim: S |
| | Variable |
| (when case was filed) | Amount Unsecured: \$ |
| the priority and state the amount. | part of the claim falls into one of the following categories, check the box specifying |
| ☐ Domestic support obligations under If U.S.C. § 507 (a)(1)(A) or (a)(1)(B) If U.S.C. § 507 (a)(B) If U.S.C. § | 180 days before plan – 11 U.S.C. § 507 (a)(5). Debtor's Amount entitled to refore the |
| Description S2,775* of deposits toward business ceased, whicheve 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 | s 2,440.00 |
| household use – 11 U.S.C. § 507 (a)(7). I faxes or penalties owed to governmental units – 11 U. 507 (a)(8). | |
| *Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w | with 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 | purpose of making this proof of claim (See instruction #6) |

Modified B10 (GCG) (4/13)

EXHIBIT "52"

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT | OF NEVADA PROOF OF CLAIM |
|--|--|
| Name of Dolton Ameri-Drams Realty, LLC Care No. 15-10110-LE | |
| expense according to 11 U.S.C. § 503. | ritus after the bookraptcy filing. You may file a request for payment of an administrative |
| Name of Graditor (the person or other entity to whom the Debtor owes manny or property): $WEICAV$ | |
| Name and address where notices should be sent: WEI CAO | Court Claim Messbers |
| 12468 ALISE PL. | Filed on: |
| Eden Prairie, MN 55347 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| Telephone number: 612-212-3379 Email address: WCa0888® Yahoo. Com | |
| Name and address where payment abould be sant (if different fram above): | Check this box if you are aware that enjurie else has filed a proof of claim releting to this claim. Attach copy of stationerst purity particulars. |
| * | FILED - 00294 |
| | District of Nevada |
| Telephone number: Borall address: | Ameri-Dream, LLC |
| | |
| 2 Bests the Chales Tenant lental deposits | the principal emotion of the claim, Attack a previous flux benders become or abstract. |
| Obeck this box if the plain hachudes interest or other charges in addition to | Debier may have scheduled 3b. Uniform Chim Identifier (optimal): |
| 2. Bests for Claims Tenant lental defosits (See justication 62) 3. Last four digits of any succider by which creditor biaseliles debtors 3. | Debter may have scheduled 36. Uniform Claim identifier (optimal): |
| 2 Basis for Classes Tenant lental deposits (See instruction 12) | Dehace may have scheduled St. Uniform Claim identifier (optimal): WEH CAO |
| 2. Bests for Claim: Tenant lental deposits (See justication #2) 3. Last four digits of any mumber by which creditor biasetiles debtor: 8 2 1 9 4. Secured Claim: (See instruction #4) Check the appropriate box if the claim is secured by a line on property at a rig ettech required reducted documents, and provide the requested information. | Debater may have scheduled account as: WEL CAO (See instruction 63s) Amount of account other charges, as of the time case |
| Description box if the plain backgoing interest or other charges in addition to Rests the Claim: Tenant lent deposits (See ignituation 62) 3. Less four digits of any mumber by which creditor biaselifles debtor: 8 2 1 9 4. Secured Claim (See instruction 64) Check the appropriate box if the claim is secured by a line on property or a right required reducted documents, and provide the requested inflammation. Nature of property or right of setudict. © Real Estato Other | Dehace may have exheduled account as: WEL CAO (See instruction 63a) Amount of arrearage and other charges, as of the time case that of actoff, was filed, instruction in account claim, if anys score Vehicles |
| Describe: Describe: Check this box if the plain backades interest or other charges in addition to the Check Tenant lent all deposits (See instruction #2) Last four dights of any outsider by which creditor bisselfles debtor: 8 2 1 9 4. Secured Chebs (See instruction #4) Cheek the appropriate box if the claim is secured by a line on property or a right track required reducted documents, and provide the required information. Nature of property or right of setuality Real Estate Describe: Value of Property: 8 Annoted Interest Rate | Debtor may have scheduled account an WEH CAO (See instruction 83a) (See instruction 83b) Amount of arrestage and other charges, as of the time case was filed, included in secured claim, if anys Sales for perfection: Annount of Secured Claims: S |
| Describe: Describe: Secured Christ See Instruction 64) Cheek the appropriate box if the claim is secured by a line on property or a right required reducted describe. Nature of property or right of setuff: Value of Property: 8 | Debtor may have scheduled account an WEH CAO (See instruction 63a) (See instruction 63b) Amount of arrestage and other charges, as of the time case was filled, included in secured claim, if anys Basis for perfection: Account of Secured Claims: S |
| Describe: Check this box if the plain includes interest or other charges in addition to the charges in addition to the charges the addition to the charges the addition to the charges the charges the addition to the charges the appropriate box if the claim is secured by a line on property or a right stack required reducted documents, and provide the requested information. Nature of property or right of setuality Describe: Value of Property: | Debtor may have scheduled account an WEH CAO (See instruction 83s) (See instruction 83s) Amount of arrestage and other charges, as of the time case was filed, included in secured claim, if anys Secure Vehicles Basis for perfection: Amount of Secured Claim: Amount Unsecured: For of the claim falls into one of the following enterprise, check the bes specifying times (up to C Contributions to an employee benefit (days before plan - 11 U.S.C. 507 (a)(5). |
| Describe: Check this box if the plain includes interest or other charges in addition to the charges in addition to the charges the addition to the charges the charges in addition to the charges the countries the charges the countries the charges the charges the countries the charges the countries the countries the charges the | Dehace may have scheduled account an WEL CAO (See instruction 63s) Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if anys Basis for perfection: Amount of Secured Claim: Amount Unsecured: For of the claim falls into one of the following enterprise, check the best specifying farm (up to Ci Contributions to an employee benefit days before plan - 11 U.S.C. § 507 (a)(5). Secriter - Ci Other - Specify applicable puragraph of 11 U.S.C. § 507 (a)(). Amount entitled to principle. |
| Describe: Check this box if the plaim includes interest or other charges in addition to the Claim: Tenant Tenant Centum Centum | Dehater may have scheduled account an WEH CAO (See instruction 63s) Amount of arrestage and other charges, as of the time case was filed, included in secured claim, if anys Basis for perfection: Amount of Secured Claim: Amount Unsecured: For of the claim falls into one of the following enterprise, check the best specifying form (up to Ci Contributions to an employee benefit days before plan - 11 U.S.C. 507 (a)(5). In section - Ci Contributions in an employee benefit of the claim of it U.S.C. 507 (a)(5). In section - Ci Contributions in an employee benefit of the following contribution of 11 U.S.C. 507 (a)(5). |

EXHIBIT "53"

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| 111111 | | ш | ш | | | | 10 | |

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT | DF 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 or expense according to 11 U.S.C. § 503. | ises ofter the bankruptcy filing. You may file a request for payment of an administrative |
| Name of Creditor (the person of other entity to whom the Debtor owes money or property): Hong Feng Hu | ☐ Check this box to indicate that this claim amends a previously filed claim. |
| Name and address where notices should be sent: | Court Claim Number: |
| Hong Feng. Hu | (If known) |
| 9422 Alderbury St. | Filed on: |
| Cypress, CA 9.630 | |
| Telephone number: 714-995-9257 Email address: hhu & @yakeo. 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 - 00295 |
| Talanhara aventari | District of Nevada |
| Telephone number: Email address: | . Ameri-Dream, LLC |
| Amount of Claim as of Date Case Filed: S 1875 | |
| 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: Deposit on rental property 90 (See instruction #2) | 28 Wine Cellar |
| 3. Last four digits of any number by which creditor identifies debtor: 3a | Debtor may have scheduled 3b. Uniform Claim Identifier (optional): |
| 7 9 5 1 | tong Feng Hu |
| | (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 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: |
| , | Motor Vehicle |
| Describe: | Basis for perfection: |
| Value of Property: S | Amount of Secured Claim: S |
| Annual Interest Rate% | Amount Unsecured: \$ 1875 |
| 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 |
| Up to \$2,775* of deposits toward purchase, lease, or rensal of property or services for personal, family, or the property of the property of the property or services for personal, family, or the property of | 0 days before plan - 11 U.S.C. § 507 (a)(5). btor's Amount entitled to referity: |
| household use – 11 U.S.C. § 507 (a)(7). Takes or penalises over to governmental units – 11 U. 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 | ourpose of making this proof of clasm. (See instruction #6) |
| | Modified B10 (CCC) (4/13) |

EXHIBIT "54"

| | 44.14 (34) 853 16 | |
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| | 1URAI (OHI BEI 18 | |
| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT | OF NEVADA PROOF | OF CLAIM - |
| Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE | D | |
| NOTE: Do not use this form to make a claim for an administrative expense that a expense occording to 11 U.S.C. § 503. | rises after the bankruptcy filing. You may file a request for paymen | t of an administrative |
| Name of Creditor (the person or other entity to whom the Debtor owes money or property): ROLAND LAU, JOAN LAU | Check this box to indicate that this claim amends a previously Court Claim Number: | y filed claim. |
| Name and address where notices should be sent: | 215 9 15 12110753 | y Grove |
| ROLAND AND JUAN LAU | BK-3-15-10110>LETHI known) | 36 |
| 6139 SOLAMA WAY | Filed on: | -5 2015 |
| BANNING, CA 92220 | JAN 9, 2015 | 1 |
| Telephone number: 951-769-3978 Email address: Ylau 6221 Gymail 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 p this claim. Attach copy of statement giving particulars. | proof of claim relating |
| An About | | |
| AS ABOUE | FILED - 00298 | - |
| Telephone number: | District of Nevada Ameri-Dream, LLC | |
| Email address: 1. Amount of Claim as of Date Case Filed: S \ \ 990.00 | | |
| 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. Check this box if the claim includes interest or other charges in addition. | to the principal amount of the claim. Attach a statement that itemize | |
| 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 DEPOSITS PARTICION (See instruction #2) FOR TEASE PROPERTY | to the principal amount of the claim. Attach a statement that itemize ID BY TENANT TO ROLAND & AND HELD BY AMERI-DRE Ja. Debtor may have scheduled 3h. Uniform Claim Id | JOAN L |
| 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 DEPOSITS PARTICION (See instruction #2) FOR LEASE PROPERTY | to the principal amount of the claim. Attach a statement that itemize ID BY TENANT TO ROLAND & AND HELD BY AMERI-DRE In. Debtor may have scheduled 3h. Uniform Claim Id | JOAN L |
| 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 DEPOSITS PARTICION (See instruction #2) FOR LEASE PROPERTY Last four digits of any number by which creditor identifies debtor: | to the principal amount of the claim. Attach a statement that itemize ID BY TENANT TO ROLAND A AND HELD BY AMERI-DRE Ja. Debtor may have scheduled account as: (See instruction #3a) (See instru | JOAN L EAM lentifier (optional): |
| 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 Check this box if the claim includes interest or other charges in addition Entitle PROPERT Last four digits of any number by which creditor identifies debtor: C 7 9 5 Check the appropriate box if the claim is secured by a lien on property or a attach required redacted documents, and provide the requested information. Nature of property or right of setoff: Check the appropriate box if the claim is secured by a lien on property or a attach required redacted documents, and provide the requested information. | to the principal amount of the claim. Attach a statement that itemize ID BY TENANT TO ROLAND A AND HELD BY AMERI-DRE Is. Debtor may have scheduled account as: (See instruction #3a) (See instruction #3a) Amount of arrearage and other charges, as a was filed, included in secured claim, if any: | JOAN L EAM lentifier (optional): |
| 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 Check this box if the claim includes interest or other charges in addition Entitle PROPERT Last four digits of any number by which creditor identifies debtor: C 7 9 5 Check the appropriate box if the claim is secured by a lien on property or a attach required redacted documents, and provide the requested information. Nature of property or right of setoff: | to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal amount of ROLAND AND HELD BY AMERI-DRE TO | JOAN L EAM lentifier (optional): |
| 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 DEPOSITS PARTICLES (See instruction #2) FOR LEASE PROPERTY Last four digits of any number by which creditor identifies debtor: Q 7 9 5 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a liem on property or a attach required redacted documents, and provide the requested information. Nature of property or right of setoff: Describe: Value of Property: S | to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal and the principal and the principal account as: (See instruction #3a) Amount of arrearage and other charges, as a was filed, included in secured claim, if any: Motor Vehicle Basis for perfection: | JOAN L EA M lentifier (optional): |
| 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 Check this box if the claim includes interest or other charges in addition Less for Claim: SECURITY DEPOSITS PATE (See instruction #2) FOR LEASE PROPERT Less four digits of any number by which creditor identifies debtor: G 7 9 5 Last four digits of any number by which creditor identifies debtor: C 7 9 5 Less four digits of any number by which creditor identifies debtor: C 7 9 5 Less four digits of any number by which creditor identifies debtor: C 7 9 5 Less four digits of any number by which creditor identifies debtor: C 7 9 5 Less four digits of any number by which creditor identifies debtor: C 7 9 5 Less four digits of any number by which creditor identifies debtor: C 7 9 5 Less four digits of any number by which creditor identifies debtor: C 7 9 5 Less four digits of any number by which creditor identifies debtor: C 9 5 Less four digits of any number by which creditor identifies debtor: C 9 5 Anount of Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a attach required redacted documents, and provide the requested information. Nature of property or right of setoff: C R 9 5 C P O S T S P A C R O F A C P S T S P A Anount of Claim (See instruction #4) C P O S T S P A C P O S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S P A C P S T S T S T S T S T S T S T S T S T S | to the principal amount of the claim. Attach a statement that itemize ID BY TENANT TO ROLAND AND HELD BY AMERI-DRE Is. Debtor may have scheduled account as: (See instruction #3a) (See instruction #3a) (See instruction #3a) Amount of arrearage and other charges, as of was filed, included in secured claim, if any: Motor Vehicle Basis for perfection: Amount of Secured Claim: Amount Unsecured: \$ Variable Amount Unsecured: \$ part of the claim falls into one of the following categories, check | EAM Lentifier (optional): action #3b) If the time case |
| 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 Check this box if the claim includes interest or other charges in addition Entitle PROPERT Last four Claim: SECURITY DEPOSITS PA (See instruction #2) FOR LEASE PROPERT Last four digits of any number by which creditor identifies debtor: Q 7 9 5 Last four digits of any number by which creditor identifies debtor: Q 7 9 5 Last four digits of any number by which creditor identifies debtor: Q 7 9 5 Last four digits of any number by which creditor identifies debtor: Q 7 9 5 Last four digits of any number by which creditor identifies debtor: Q 7 9 5 Last four digits of any number by which creditor identifies debtor: Q 9 5 Last four digits of any number by which creditor identifies debtor: Q 9 5 Last four digits of any number by which creditor identifies debtor: Q 9 5 Last four Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a attach required reduced information. Nature of property or right of setoff: Q R 2 5 Real Estate Q Other Describe: Value of Property: S Annual Interest Rate (when case was filed) Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any the priority and state the amount. Q Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Secured Claim (See instruction #4) Last four charges in addition. | to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal amount of Roland Park Amount of Secured Claim account as: (See instruction #3a) Amount of arrearage and other charges, as of was filed, included in secured claim, if any: Motor Vehicle Basis for perfection: Amount of Secured Claim: Amount of Secured Claim: Substitution one of the following categories, check issions (up to Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5). | LEAM lentifier (optional): action #3b) If the time case |
| 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 DEPOSITS PARTICLES (See instruction #2) FOR LEASE PROPERTY 3. Last four digits of any number by which creditor identifies debtor: C 7 9 5 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a attach required redacted documents, and provide the requested information. Nature of property or right of setoff: Describe: Value of Property: S Annual Interest Rate (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)(A) or (a)(1)(B). Up to \$2,775* of deposits toward business ceased, whicher purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). Services for personal, family, or household use 11 U.S.C. § 507 (a)(7). Taxes or penalties oved to governmental units = 11. | to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal amount of ROLAND AND HELD BY AMERIAD RELIGIOR TO ROLAND AND HELD BY AMERIAD RELIGIOR TO ROLAND AND Uniform Claim Idea account as: (See instruction #3a) Amount of arrearage and other charges, as a was filed, included in secured claim, if any: Substitute the principal amount of arrearage and other charges, as a was filed, included in secured claim; if any: Amount of Secured Claim: Amount of Secured Claim: Substitute the principal amount of the following categories, check issions (up to Debtor's plan - 11 U.S.C. § 507 (a)(5). Other - Specify applicable paragraph Amount of 11 U.S.C. § 507 (a)(5). | Lentifier (optional): action #3b) If the time case the box specifying unt entitled to prior |
| 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 DEPOSITS PA (See instruction #2) FOR LEASE PROPERT Last four digits of any number by which creditor identifies debtor: G 7 9 5 Last four digits of any number by which creditor identifies debtor: Check the appropriate box if the claim is secured by a lien on property or a attach required reducted documents, and provide the requested information. Nature of property or right of setoff: Describe: Value of Property: S Annual Interest Rate (when case was filled) 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)(A) or (a)(1)(B). Wages, salaries, or comm \$12,475*) earned within the case was filed or the purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). Taxes or penalties owed to the content of the case was filed or the purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). | to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal amount of the claim. Attach a statement that itemize to the principal amount of Roland Amount of Roland Amount of Secured Claim. Suright of setoff, amount of arrearige and other charges, as a was filed, included in secured claim, if any: Amount of arrearige and other charges, as a was filed, included in secured claim; if any: Amount of Secured Claim: Amount of Secured Claim: Amount Unsecured: Suriable Amount Unsecured: Suriable | TOAN LEATH (optional): action #3b) If the time case the box specifying unt entitled to prior |

EXHIBIT "55"

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|---|--|
| UNITED STATES BANKRUPTCY COURT FOR THE DI | ISTRICT 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 experience according to 11 U.S.C. § 503. | ense that arises 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 property). Charles Yim, Valerie Chen Yim | |
| Name and address where notices should be sent: Charles Yim, Valerie Chen Yim . 744 Serena Dr | Court Claim Number: (If known) WAY - 5 2015 |
| Pacifica, CA 94044 | Filed on: |
| Telephone number: 650-759-9509 Email address: valyim@gmail.com | |
| Name and address where payment should be sent (if different from about | ove): 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 - 00300 District of Nevada |
| Telephone number: Email address: | Ameri-Dream, LLC |
| 1. Amount of Claim as of Date Case Filed: \$ 1,025.00 | |
| 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. | |
| Check this box if the claim includes interest or other charges in | in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges. |
| | 070 W Russell Rd #2072., Las Vegas NV 89113 (Deposit statement, Deposit ent, Management Agreement attached) |
| Last four digits of any number by which creditor identifies de | |
| 2 1 6 7 | (See instruction #3a) (See instruction #3b) |
| Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on proattach required reducted documents, and provide the requested in | Amount of arrearage and other charges, as of the time case roperty or a right of setoff, was filed, included in secured claim, if any: nformation. |
| Nature of property or right of setoff: Real Estate Other | 3 |
| Describe: | |
| Value of Property: \$ | Amount of Secured Claim: S |
| Annual Interest Rate | or Variable Amount Unsecured: \$ |
| Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (the priority and state the amount. | (a). If any part of the claim falls into one of the following categories, check the box specifying |
| 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earn | es, or commissions (up to Contributions to an employee benefit ned within 180 days before plan – 11 U.S.C. § 507 (a)(5). |
| 29 Up to \$2,775* of deposits toward business ceased purchase, lease, or rental of property or services for personal, family, or | xi, whichever is earlier — Other — Specify applicable paragraph of 11 U.S.C. § 507 (a)(_). \$ 1,025.00 |
| 507 (a)(8). | units – 11 U.S.C: § |
| | s thereafter with respect to cases commenced on or after the date of adjustment. |
| 6. Credits. The amount of all payments on this claim has been cred | dited for the purpose of making this proof of claim. (See instruction #6) |

Modified B10 (GCG) (4/13)

EXHIBIT "56"

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|-------|----|----|------|------|---|-------|----------|
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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-LE | | |
| NOTE: Do not use this form to make a claim for an administrative expense that a expense according to 11 U.S.C. § 503. | ises after the bonkruptcy 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 | n amends a previously filed claim. |
| Willing IX Loo, Willing O Loo | Court Claim Number: | |
| Name and address where notices should be sent: Ming K Lee, Wing C Lee | | City Group |
| 1202 Ligurian Rd | | (known) Silest and Lines |
| Palm Beach Gardens, FI 33410 | Filed on: | \\ \text{\tin}\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\tint{\text{\text{\text{\tin}\tint{\text{\text{\text{\text{\tex{\text{\text{\texi}\tint{\text{\texi}\tint{\text{\texi}\tint{\tex{\texi}\tint{\texi}\tint{\text{\ti}\tint{\text{\texit{\text{\ti} |
| , | | MAY -5 2015 |
| 504 050 4000 | | |
| Telephone number: 561-352-1823 Email address: wm8238@yahoo.com | | |
| Name and address where payment should be sent (if different from above): | ☐ Check this box if you are aware that any | yone else has filed a proof of claim relating to |
| | this claim. Attach copy of statement giving | particulars. |
| , | | |
| | FILED - 0 | 0301 |
| Telephone number: | District of N | |
| Email address: | Ameri-Dream | m, LLC |
| Amount of Claim as of Date Case Filed: S 1,650.00 | | |
| 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. | | |
| ☐ Check this box if the claim includes interest or other charges in addition t | the principal amount of the claim. Attach a | statement that itemizes interest or charges. |
| Potundable Denocite from Postern of Q | | |
| Basis for Claim: Rendered Deposits from Renders of 9 (See instruction #2) Summary, Lease Agreement, Management, Manag | | |
| | | Uniform Claim Identifier (optional): |
| 2 1 1 3 | (See instruction #3a) | (See instruction #3b) |
| 4. Secured Claim (See instruction #4) | | d other charges, as of the time case |
| Check the appropriate box if the claim is secured by a lien on property or a attach required reducted documents, and provide the requested information. | ight of setoff, was filed, included in sec | tured claim, if any: |
| l | Motor Vehicle | s |
| □ Other | Basis for perfection; | |
| Describe: | | |
| Value of Property: S | Amount of Secured Clair | m: s |
| Annual Interest Rate | Variable Amount Unsecured: | \$ |
| Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any public priority and state the amount. | art of the claim falls into one of the followi | ng categories, check the box specifying |
| ☐ Domestic support obligations under ☐ Wages, salaries, or commit 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within ! | 80 days before plan - 11 U.S.C. § 507 (a)(| |
| the case was filed or the D The Up to \$2,775* of deposits toward business ceased, whicheve | | paragraph Amount entitled to priority: |
| purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). services for personal, family, or | of II U.S.C. § 507 (a)(). | s 1,650.00 |
| household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U | | |
| | S.C. § | |
| 507 (a)(8). | | |
| *Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter v 6. Credits. The amount of all payments on this claim has been credited for the | oith respect to cases commenced on or after th | |

EXHIBIT "57"

| · 2 | | |
|--|---|--|
| 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. | lses ofter 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). Warren Lee | Check this box to indicate that this o | claim amends a previously filed claim. |
| . Name and address where notices should be sent: Warren Lee | Court Claim Number: | (If known) City Group |
| 103 N Marengo Ave | | (San Fe |
| Alhambra, CA 91801 | Filed on: | MAY - 6 2015 |
| Telephone number: 626-253-7213 | | |
| Email address: warrentomado@gmail.com Name and address where payment should be sent (if different from above): | Check this box if you are aware that | tanyone else has filed a proof of claim relating to |
| Telephone number: | this claim. Attach copy of statement g | |
| I. Amount of Claim as of Date Case Filed: \$ 1,450.00 (Security d | eposit: \$800 + January missin | ig rent: \$650) |
| 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 | | |
| Basis for Claim: Refundable Deposits from Renters of 32 (See instruction #2) Summary, Lease Agreement, Management | | 19102 (Deposits Statement, Deposit |
| | n. Debtor may have scheduled account as: | 3b. Uniform Claim Identifier (optional): |
| 9 5 0 8 | (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 mattach required redacted documents, and provide the requested information. | Amount of arrearage was filed, included in | e and other charges, as of the time case a secured claim, if any: |
| Nature of property or right of setoff: Real Estate . | Motor Vehicle Basis for perfection: | s |
| Describe: | | |
| Value of Property: S | Amount of Secured (| Claim: \$ |
| Annual Interest Rate % ☐ Fixed or ☐ \(\text{When case was filed}\) | Variable 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 fol | lowing categories, check the box specifying |
| ☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). □ Wages, salaries, or commit \$12,475*) earned within 18 the case was filed or the Description. | 30 days before plan - 11 U.S.C. § 507 | (a)(5). |
| ☐ Up to \$2,775* of deposits toward business ceased, whichever purchase, lease, or rental of property or services for personal. family. or | r is earlier — Other – Specify application of 11 U.S.C. § 507 (a) | |
| household use = 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units = 11 U. 507 (a)(8). | | |
| *Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w | outh respect to cases commenced on or af | ier the date of adjustment. |
| 6. Credits. The amount of all payments on this claim has been credited for the | purpose of making this proof of claim. (S | See instruction #6) Modified B10 (GCG) (4/13 |

EXHIBIT "58"

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF | 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 ari expense according to 11 U.S.C. § 503. | ses after the bankruptcy filing. You may f | ile 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 cl | laim amends a previously filed claim. | | |
| Name and address where notices should be sent: | Court Claim Number: | City Group | | |
| Jeanette Zhou | | (If known) | | |
| Alexandra Assets | Filed on: | MAY - 6 2015 | | |
| 2000 Fashlon show Dr. #3426 Las Vegas, NV89109 | · | | | |
| Las Vegas, NV89109 | | <i>*</i> | | |
| Telephone number. 949 306 9198 yahoo. com | | | | |
| Name and address where payment should be sent (if different from above) | Check this box if you are aware that this claim. Attach copy of statement gw | anyone else has filed a proof of claim relating to ving particulars. | | |
| · | | | | |
| | | D - 00306 | | |
| Telephone number: | | of Nevada Oream, LLC | | |
| Email address: 1. Amount of Claim as of Date Case Filed: S 1850,00 | Allere | rtani, Ebc | | |
| 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 | h a statement that itemizes interest or charges | | |
| 2. Basis for Claim: Deposit held by de | (tor's trustee | account | | |
| | Debtor may have scheduled account as: | 3b. Uniform Claim Identifier (optional): | | |
| - | (See instruction #3a) | (Parameter 194) | | |
| Secured Claim (See instruction #4) | (200 0000000000000000000000000000000000 | (See instruction #3b) 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 redacted documents, and provide the requested information. | | secured claim, if any: | | |
| Tallite of property of right of actions | Motor Vehicle | | | |
| Describe: | Basis for perfection: | | | |
| Value of Property: S | Amount of Secured C | Daim: S | | |
| Annual Interest Rate% | /ariable Amount Unsecured: | \$ | | |
| Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any pe the priority and state the amount. | art of the claim falls into one of the follo | owing categories, check the box specifying | | |
| ☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B) □ Wages, salaries, or commis \$12,475*) carned within 18 the case was filed or the De | 80 days before plan – 11 U.S.C. § 507 | (a)(5). | | |
| Up to \$2,775* of deposits toward business ceased, whichever purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4) | | | | |
| services for personal, family, or household use – 11 U.S.C. § 507 (a)(7) Taxes or penalties owed to governmental units – 11 U.S.O. (a)(8) | | \$18.50. | | |
| *Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w | uth respect to cases commenced on or after | er the date of adjustment. | | |
| 6. Credits. The amount of all payments on this claim has been credited for the | numose of making this proof of claim. (Se | ee ststruction #6) | | |

Modified B10 (GCG) (4/13)

EXHIBIT "59"

| | | 111111111 | 1111 |
|------|-------|-----------|------|
| 1160 | MI IN | | 1661 |

| NITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA PROOF OF CLAIM | | | | |
|---|--|--|--|--|
| Name of Debtor; Ameri-Dream Realty, LLC Case No. 15-10110-LED | | | | |
| | | | | |
| | ses after the bankruptcy filing. You may file a request for payment of an administrative | | | |
| expense according to 11 U.S.C. § 503. | Charle this has to understarthy this claim amonds a provincely filed claim | | | |
| 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: | | | |
| JEANETTE ZHOW | (If known) Sty Group | | | |
| Alexandra Accete | Sarah Mach | | | |
| Alexandra Assets 2000 Fashion show Dr. #3426 | Filed on: | | | |
| Las Vegas, NV89109 | NAY - 6 20.5 | | | |
| · · | \ / | | | |
| Telephone number. 649 306 9198 Email address: drxue dong yahoo. com | | | | |
| Email address: drxue dong yohoo.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 - 00308 | | | |
| Telephone number: | District of Nevada | | | |
| Email address: | Ameri-Dream, LLC | | | |
| 1. Amount of Claim as of Date Case Filed: \$ 1625. | | | | |
| 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: Terrent dedosit hel | d by deltor's truster account | | | |
| (See instruction #2) | to by take years. | | | |
| 3. Last four digits of any number by which creditor identifies debtor: 3a | | | | |
| | account as: | | | |
| - | (See instruction #3a) (See instruction #3b) | | | |
| 4. Secured Claim (Sec instruction #4) | 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 ru attach required reducted documents, and provide the requested information. | ght of setoff. was filed, included in secured claim, if any: | | | |
| | Motor Vehicle | | | |
| ` □ Other | Basis for perfection: | | | |
| December 1 | | | | |
| Describe: | | | | |
| Value of Property: S | Amount of Secured Claim: S | | | |
| Value of Property: S | | | | |
| Value of Property: S | /ariable | | | |
| Value of Property: S | | | | |
| Value of Property: S | Amount Unsecured: \$ | | | |
| Value of Property: S | Amount Unsecured: art of the claim falls into one of the following categories, check the box specifying sions (up to Contributions to an employee benefit | | | |
| Value of Property: S Annual Interest Rate | Amount Unsecured: \$ art of the claim falls into one of the following categories, check the box specifying sisions (up to Contributions to an employee benefit plan = 11 U.S.C. § 507 (a)(5). | | | |
| Value of Property: S | Amount Unsecured: art of the claim falls into one of the following categories, check the box specifying sions (up to Ocontributions to an employee benefit plan = 11 U.S.C. § 507 (a)(5). Amount entitled to priority: | | | |
| Value of Property: S Annual Interest Rate | Amount Unsecured: \$ art of the claim falls into one of the following categories, check the box specifying assions (up to Odays before plan - 11 U.S.C. § 507 (a)(5). bitor's is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_). Amount entitled to priority: \$ 1625. | | | |
| Value of Property: S Annual Interest Rate | Amount Unsecured: \$ art of the claim falls into one of the following categories, check the box specifying assions (up to Odays before plan - 11 U.S.C. § 507 (a)(5). bitor's is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_). Amount entitled to priority: \$ 1625. | | | |
| Value of Property: S Annual Interest Rate | Amount Unsecured: art of the claim falls into one of the following categories, check the box specifying sisons (up to solve) to solve benefit plan = 11 U.S.C. § 507 (a)(5). bloor's is earlier = Other = Specify applicable paragraph of 11 U.S.C. § 507 (a)(_). S.C. § Amount entitled to priority: \$1625. | | | |

EXHIBIT "60"

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF | | | | 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 arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503. | | | | | |
| 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: | | | |
| JEANETTE ZHOU | | | | (If known) | |
| Alexandra Assets | | Filed on: WAY - 6 2015 | | | |
| 2000 Fashion show Dr. #3426 | | | | | |
| | Las Vegas, NV89109 | | | | |
| Telephone number 949 3069198 Email address: drxuedong@yahoo.com | | | | | |
| Nam | e and address where payment should be sent (if different from above): | | oox if you are aware tha ach copy of statement g | It anyone else has filed a proof of claim relating to giving particulars. | |
| | | | | | |
| | | | FIL | ED - 00309 | |
| | phone number | District of Nevada | | | |
| Email address: Ameri-Dream, LLC 1. Amount of Claim as of Date Case Filed: \$ 2575, 50 | | | | -Dream, LLC | |
| 1. | | | | | |
| | 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. | (See instruction #2) | | | | |
| 3. | Last four digits of any number by which creditor identifies debtor: | a. Debtor may account as: | have scheduled | 3b. Uniform Claim Identifier (optional): | |
| | | (See instr | ruction #3a) | (See instruction #3b) | |
| 4. | Secured Claim (See instruction #4) 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 right of setoff, attach required reducted documents, and provide the requested information. | | | | |
| | Nature of property or right of setoff: Real Estate Other | Motor Vehicle | Basis for perfection: | | |
| | Describe: | | | | |
| | Value of Property: S | | Amount of Secured | Claim: S | |
| | Annual Interest Rate% Fixed or | Variable | Amount Formanies | | |
| 5. | Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any | nart of the claim | Amount Unsecured: falls into one of the fo | | |
| | the priority and state the amount. | | | | |
| | □ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). □ Wages, salaries, or commissions (up to □ Contributions to an employee benefit s12,475*) earned within 180 days before plan – 11 U.S.C. § 507 (a)(5). the case was filed or the Debtor's | | | | |
| | ↓ Up to \$2,775* of deposits toward business ceased, whichever | business ceased, whichever is earlier—Other—Specify applicable paragraph of 11 U.S.C. § 507 (a)(_). Trices for personal, family, or | | | |
| | services for personal, family, or | | | | |
| | household use – 11 U.S.C. § 507 (a)(7) governmental units – 11 U 507 (a)(8) | | | | |
| | •Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment. | | | | |
| 6. | 6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6) | | | | |