

**United States Bankruptcy Court  
District of Puerto Rico**

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>RIVERA-QUINONES, RAFAEL</b>	Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>dba SUPERMERCADOS MARRERO</b>	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>5098;66-0700132</b>	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State) <b>CARR 568 KM. 28.9 BARRIO PADILLA COROZAL, PR</b>	Street Address of Joint Debtor (No. and Street, City, and State)
ZIPCODE <b>00783</b>	ZIPCODE
County of Residence or of the Principal Place of Business: <b>Corozal</b>	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <b>HC 05 BOX 10953 COROZAL, PR</b>	Mailing Address of Joint Debtor (if different from street address):
ZIPCODE <b>00783</b>	ZIPCODE
Location of Principal Assets of Business Debtor (if different from street address above):	
ZIPCODE	

<b>Type of Debtor</b> (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)  	<b>Nature of Business</b> (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other  <div style="text-align: center;"> <b>Tax-Exempt Entity</b> (Check box, if applicable)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)         </div>	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  <b>Nature of Debts</b> (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts
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<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	<b>Check one box: Chapter 11 Debtors</b> <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input checked="" type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). <b>Check all applicable boxes</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes, in accordance with 11 U.S.C. § 1126(b).
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<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.	<b>THIS SPACE IS FOR COURT USE ONLY</b>
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1000-5000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000	
<b>Estimated Assets</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	



**Voluntary Petition**  
(This page must be completed and filed in every case)

Name of Debtor(s):  
RAFAEL RIVERA-QUINONES

**Signatures**

**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X   
Signature of Debtor

X \_\_\_\_\_  
Signature of Joint Debtor

\_\_\_\_\_  
Telephone Number (If not represented by attorney)  
2/14/2011  
Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X \_\_\_\_\_  
(Signature of Foreign Representative)

\_\_\_\_\_  
(Printed Name of Foreign Representative)

\_\_\_\_\_  
(Date)

**Signature of Attorney\***

X /S/CARMEN D. CONDE TORRES  
Signature of Attorney for Debtor(s)

CARMEN D. CONDE TORRES 207312  
Printed Name of Attorney for Debtor(s)

C. CONDE & ASSOCIATES  
Firm Name

254 SAN JOSE STREET  
Address

SUITE 5c - SAN JUAN, PR 00901-1523

787-729-2900  
Telephone Number

2/14/2011  
Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X \_\_\_\_\_  
Signature of Authorized Individual

\_\_\_\_\_  
Printed Name of Authorized Individual

\_\_\_\_\_  
Title of Authorized Individual

\_\_\_\_\_  
Date

**Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

\_\_\_\_\_  
Printed Name and title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

\_\_\_\_\_  
Address

X \_\_\_\_\_

\_\_\_\_\_  
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.*

UNITED STATES BANKRUPTCY COURT  
District of Puerto Rico

RIVERA-QUINONES, RAFAEL dba  
SUPERMERCADOS MARRERO

In re \_\_\_\_\_  
Debtor(s)

Case No. \_\_\_\_\_  
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor:

RAFAEL RIVERA-QUINONES

Date: 2/14/2011

Certificate Number: 03605-PR-CC-013846832



03605-PR-CC-013846832

## CERTIFICATE OF COUNSELING

I CERTIFY that on February 11, 2011, at 12:00 o'clock PM AST, RAFAEL RIVERA QUINONES received from Consumer Credit Counseling Service of Puerto Rico, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of Puerto Rico, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted in person.

Date: February 11, 2011 By: /s/Kathielly Soto

Name: Kathielly Soto

Title: Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

# United States Bankruptcy Court District of Puerto Rico

In re RIVERA-QUINONES, RAFAEL dba SUPERMERCADOS MARRERO

Case No. \_\_\_\_\_

Chapter 11

Debtor(s)

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ 0.00

Prior to the filing of this statement I have received ..... \$ 30,000.00 (RETAINER)

Balance Due ..... \$ 0.00

2. The source of compensation paid to me was:

Debtor       Other (specify)

3. The source of compensation to be paid to me is:

Debtor       Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

in the case of Carmen D. Conde Torres, Esq, (Senior Attorney), a rate of \$300.00 per hour plus any costs and expenses;

- In the case of Associates, a rate of \$ 275.00 per hour plus any costs and expenses;
- In the case of Junior Attorney, a rate of \$250.00 per hour plus any costs and expenses;
- in the case of legal assistance such as paralegal or in house special clerical services and/or accounting analyst, a rate of \$100.00 per hour plus any costs and expenses.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

2/14/2011  
Date

/S/CARMEN D. CONDE TORRES  
Signature of Attorney

C. Conde & Associates  
Name of law firm

**UNITED STATES BANKRUPTCY COURT  
District of Puerto Rico**

RIVERA-QUINONES, RAFAEL dba  
SUPERMERCADOS MARRERO

In re \_\_\_\_\_,  
Debtor

Case No. \_\_\_\_\_

Chapter 11

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
BARNETT PO BOX 404295 ATLANTA, GA 30384-4295				10,864.23
PLAZA PROVISION COMPANY PO BOX 363328 SAN JUAN, PR 00936-3328				6,219.08
CARRERO PRODUCE PO BOX 2438 BAYAMON, PR 00619				5,169.00



(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	(5) <i>Amount of claim [if secured also state value of security]</i>
<p>BALLESTER HERMANOS, INC GPO BOX 4548 SAN JUAN, PR 00936</p>				5,053.90
<p>PACKERS RETAIL GARDEN HILLS PLAZA PMB342 1353 CARR 19 GUAYNABO, PR 00966-2700</p>				4,045.89
<p>PEMAR DISTRIBUTORS, INC PO BOX 514 SABANA SECA, PR 00952-514</p>				3,638.24
<p>MENDEZ COMPANY PO BOX 363348 SAN JUAN, PR 00936-3348</p>				3,368.92
<p>PLYWOOD AND LUMBER EXPORT PO BOX 29228 SAN JUAN, PR 00929</p>				3,095.95
<p>RAMSEY DISTRIBUTORS PO BOX 2132 VEGA ALTA, PR 00692</p>				2,540.72

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	(5) <i>Amount of claim [if secured also state value of security]</i>
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LANCO  
URB. APONTE #5  
SAN LORENZO, PR  
00754

2,500.00

B FERNANDEZ &  
HNOS, INC  
PO BOX 363629  
SAN JUAN, PR  
00939-3629

2,176.88

SAN JUAN  
TRADING CO, INC  
PO BOX 366458  
SAN JUAN, PR  
00936-6558

2,021.22

COLOSO FOOD, INC  
PO BOX 363013  
SAN JUAN, PR  
00936-3013

1,839.51

MARS  
PO BOX 2071  
BAYAMON, PR  
00960-2071

1,731.83

HERSHEYS  
PO BOX 10752  
SAN JUAN, PR  
00992-0752

1,694.29

MATOS SANTOS  
PO BOX 11925  
SAN JUAN, PR  
00922

1,673.38

CASTELL  
PO BOX 364088  
SAN JUAN, PR  
0936-4088

1,636.10

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	(5) <i>Amount of claim [if secured also state value of security]</i>
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AUTORIDAD DE ACUEDUCTOS Y ALCANTARILLADOS

1,594.54

PO BOX 70101  
SAN JUAN, PR  
00936-8101

NORTH CARIBE IMPORT OF PR, INC  
PO BOX 1921  
CAROLINA, PR  
00984

1,298.67

JAR FOOD DISTRIBUTORS, INC  
PO BOX 158  
CATANO, PR 00963

1,174.99

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing list of twenty largest unsecured creditors and that it is true and correct to the best of my knowledge, information and belief.

Date 2/14/2011

Signature   
RAFAEL RIVERA-QUINONES

AUTORIDAD DE ACUEDUCTOS Y ALCANTARILLADOS  
PO BOX 70101  
SAN JUAN PR 00936-8101

B FERNANDEZ HNOS INC  
PO BOX 363629  
SAN JUAN PR 00939-3629

BALLESTER HERMANOS INC  
GPO BOX 4548  
SAN JUAN PR 00936

BANCO BILBAO VIZCAYA  
PO BOX 364745  
SAN JUAN PR 00936-4745

BANCO POPULAR DE PR  
PO BOX 70354  
SAN JUAN PR 00936-8354

BANCO SANTANDER DE PR  
PO BOX 191080  
SAN JUAN PR 00918-1080

BARNETT  
PO BOX 404295  
ATLANTA GA 30384-4295

BISMARCK  
PO BOX 192198  
SAN JUAN PR 00919-2198

BORINQUEN BISCUIT CORP  
APARTADO 5644  
YAUCO PR 00698-1607

BORINQUEN MACARRON CORP  
PO BOX 3045  
YAUCO PR 00698

CARRERO PRODUCE  
PO BOX 2438  
BAYAMON PR 00619

CASTELL  
PO BOX 364088  
SAN JUAN PR 0936-4088

CG PRINTING  
CALL BOX 30000  
SUITE 566  
CANOVANAS PR 00729

COLOSO FOOD INC  
PO BOX 363013  
SAN JUAN PR 00936-3013

CORDIALSA  
PO BOX 9021741  
SAN JUAN PR 00902-1741

CRIM  
PO BOX 195387  
SAN JUAN PR 00919-5387

DEPARTAMENTO DE HACIENDA  
NEGOCIADO DE IMPUESTO AL CONSUMO  
PO BOX 9024140  
SAN JUAN PR 00902-4140

EL ALMACEN DE LA BELLEZA  
CALLE LUCIA VAZQUEZ 6  
CAYEY PR 00736

EMPRESAS FAMOSA  
PO BOX 51968  
TOA BAJA PR 00950-1968

EUGENIO CALDERO  
BOX 443  
TOA ALTA PR 00954

FERNANDO C PUJALS BROS INC  
PO BOX 364245  
SAN JUAN PR 00936-4245

GLENDIA ISEL GUZMAN ORTIZ

HERSHEYS  
PO BOX 10752  
SAN JUAN PR 00992-0752

IRS  
CITIVIEW PLAZA NO 2  
48 CARR 165  
SUITE 2000  
GUAYNABO PR 00968-8000

IRS  
DEPARTMENT OF TREASURY  
AUSTIN TEXAS 73301-0215

JAR FOOD DISTRIBUTORS INC  
PO BOX 158  
CATANO PR 00963

JOSE MALGOR COMPANY INC  
PO BOX 9021904  
SAN JUAN PR 00902-1904

JRH INTERNATIONAL  
PO BOX 2066  
CAGUAS PR 00726-2066

LANCO  
URB APONTE 5  
SAN LORENZO PR 00754

LCA SCHOOL OFFICE SUPPLY  
AVE MAGNOLIA GARDENS  
BAYAMON PR 00956

MARS  
PO BOX 2071  
BAYAMON PR 00960-2071

MATOS SANTOS  
PO BOX 11925  
SAN JUAN PR 00922

MENDEZ COMPANY  
PO BOX 363348  
SAN JUAN PR 00936-3348

MORALES DISTRIBUTORS INC  
PO BOX 787  
HORMIGUEROS PR 00660

NORTH CARIBE IMPORT OF PR INC  
PO BOX 1921  
CAROLINA PR 00984

PACKERS RETAIL  
GARDEN HILLS PLAZA  
PMB342 1353 CARR 19  
GUAYNABO PR 00966-2700

PEDRO BARBA HIJOS INC  
PO BOX 363932  
SAN JUAN PR 00936-3932

PEMAR DISTRIBUTORS INC  
PO BOX 514  
SABANA SECA PR 00952-514

PEPSI COLA PR DISTRIBUTING  
PO BOX 11219  
CAPARRA HEIGHTS STA  
SAN JUAN PR 00922

PERSONNA AMERICAN SAFETY RAZOR CO  
36 CARR 20  
SUITE 503  
GUAYNABO PR 00966

PLAZA PROVISION COMPANY  
PO BOX 363328  
SAN JUAN PR 00936-3328

PLYWOOD AND LUMBER EXPORT  
PO BOX 29228  
SAN JUAN PR 00929

PUERTO RICO FOOD PAPER DIST INC  
PO BOX 535  
BAYAMON PR 00960-0535

R H COSMETICS INC  
PO BOX 3511  
BAYAMON GARDENS STA  
BAYAMON PR 00958

RAMSEY DISTRIBUTORS  
PO BOX 2132  
VEGA ALTA PR 00692

RJ REYNOLDS TABACCO COMPANY  
PO BOX 363509  
SAN JUAN PR 00936-8488



ROVIRA FOODS  
URB BUENA VISTA  
619 AVE LA CEIBA  
PONCE PR 00717-1901

SAN JUAN TRADING CO INC  
PO BOX 366458  
SAN JUAN PR 00936-6558

THOMAS DIAZ INC  
PO BOX 1031  
SABANA SECA PR 00952-1031

TROFIMA CORP  
PO BOX 877  
ARECIBO PR 00613-0877

VERPAS PRODUCTS INC  
PO BOX 29410  
65TH INF STATION  
SAN JUAN PR 00929-9410

UNITED STATES BANKRUPTCY COURT  
District of Puerto Rico

RIVERA-QUINONES, RAFAEL dba  
SUPERMERCADOS MARRERO

In re \_\_\_\_\_,  
Debtor

Case No. \_\_\_\_\_

Chapter 11

VERIFICATION OF LIST OF CREDITORS

I hereby certify under penalty of perjury that the attached List of Creditors which consists of 6 pages, is true, correct and complete to the best of my knowledge.

Date 2/14/2011

Signature  
of Debtor



RAFAEL RIVERA-QUINONES