

**United States Bankruptcy Court**  
**DISTRICT OF PUERTO RICO**

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>A+HC HOLDING, INC.,                  a Corporation</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>aka FARMACIAS EL AMAL</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>66-0704155</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. & Street, City, and State): <b>282 JESUS T. PINERO AVENUE                  San Juan PR</b>	Street Address of Joint Debtor (No. & Street, City, and State):
ZIP CODE <b>00927</b>	ZIP CODE
County of Residence or of the Principal Place of Business: <b>PUERTO RICO</b>	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <b>PO BOX 29166                  San Juan PR</b>	Mailing Address of Joint Debtor (if different from street address):
ZIP CODE <b>00929-9196</b>	ZIP CODE
Location of Principal Assets of Business Debtor (if different from street address above): <b>SAME</b>	ZIP CODE

<b>Type of Debtor</b> (Form of organization) (Check one box.) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" 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  <hr/>	<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 <b>PHARMACY CHAIN</b>  <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).	<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.  <b>Chapter 11 Debtors:</b> <b>Check one box:</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 debtor 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 of creditors, in accordance with 11 U.S.C. § 1126(b).
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<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" 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>Estimated Number of Creditors</b> <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input checked="" type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <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 type="checkbox"/> \$1,000,001 to \$10 million <input checked="" 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 type="checkbox"/> \$1,000,001 to \$10 million <input checked="" 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	THIS SPACE IS FOR COURT USE ONLY
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<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>A+HC HOLDING, INC.,</b> <b>a Corporation</b>
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**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location Where Filed: <b>NONE</b>	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor: <b>NONE</b>	Case Number:	Date Filed:
District:	Relationship:	Judge:

<p style="text-align: center;"><b>Exhibit A</b></p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition</p>	<p style="text-align: center;"><b>Exhibit B</b></p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. §342(b).</p> <p style="text-align: center;"><b>X</b></p> <hr/> <p style="text-align: center;">Signature of Attorney for Debtor(s) <span style="float: right;">Date</span></p>
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**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

Yes, and exhibit C is attached and made a part of this petition.

No

**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D completed and signed by the debtor is attached and made part of this petition.

If this is a joint petition:

Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

**Information Regarding the Debtor - Venue**  
(Check any applicable box)

Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.

There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Certification by a Debtor Who Resides as a Tenant of Residential Property**  
(Check all applicable boxes.)

Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_

(Name of landlord that obtained judgment)

\_\_\_\_\_

(Address of landlord)

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

**Voluntary Petition**

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

Name of Debtor(s):  
**A+HC HOLDING, INC.,**  
**a Corporation**

**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)

\_\_\_\_\_  
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 11 U.S.C. § 1515 are attached.

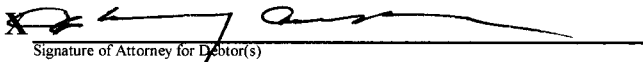
Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

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

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

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

**Signature of Attorney\***

X   
Signature of Attorney for Debtor(s)

**CHARLES A. CUPRILL HERNANDEZ 114312**  
Printed Name of Attorney for Debtor(s)

**CHARLES A. CUPRILL, P.S.C. LAW OFFICES**  
Firm Name

**356 FORTALEZA STREET**  
Address

**SECOND FLOOR**

**San Juan PR 00901**

**787-977-0515**  
Telephone Number

**2/24/2011**  
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 Non-Attorney Bankruptcy 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(h) setting a maximum fee for services bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing 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

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.*

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

X   
Signature of Authorized Individual

**MOHAMMAD YASSIN**  
Printed Name of Authorized Individual

**President**

Title of Authorized Individual

**2/24/2011**  
Date

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF PUERTO RICO**

In re **A+HC HOLDING, INC.**  
a Corporation  
aka **FARMACIAS EL AMAL**

Case No. 07-  
Chapter 7

Debtor(s)

**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).

Name of Creditor and Complete Mailing Address Including Zip Code	Name, Telephone Number and Complete Mailing Address, Including Zip Code, of Employee, Agent, or Department of Creditor Familiar with Claim Who May Be Contacted	Nature of Claim (Trade Debt, Bank Loan, Government Contract, etc.)	Indicate if Claim is Contingent, Unliquidated, Disputed, or Subject to Setoff	Amount of Claim (If Secured Also State Value of Security)
<b>1</b> <b>BORSCHOW HOSPITAL &amp; MED. SUP.</b> <b>PO BOX 366211</b>  <b>SAN JUAN PR</b> <b>00936-6211</b>	Phone: 787-767-6910 <b>Borschow (Drogueria)</b> <b>PO Box 366211</b> <b>San Juan PR 00936-6211</b>	<b>INVENTORY PURCHASES</b>		<b>\$ 1,246,683.57</b>
<b>2</b> <b>RD TRUJILLO ALTO, L.P.</b> <b>PO BOX 5020</b> <b>3333 NEW HYDE PARK ROAD</b> <b>NEW HYDE PARK NY</b> <b>11042-0020</b>	Phone: 787-999-0674 <b>RD TRUJILLO ALTO, L.P.</b> <b>PO BOX 5020</b> <b>3333 NEW HYDE PARK ROAD</b> <b>NEW HYDE PARK NY</b> <b>11042-0020</b>	<b>RENT IN ARREARS</b>		<b>\$ 255,265.98</b>
<b>3</b> <b>PR ELECTRIC POWER (PREPA)</b> <b>BANKRUPTCY OFFICE</b> <b>PO BOX 364267</b> <b>San Juan PR 00936-4267</b>	Phone: 787-289-4489 <b>PR ELECTRIC POWER (PREPA)</b> <b>BANKRUPTCY OFFICE</b> <b>PO BOX 364267</b> <b>San Juan PR 00936-4267</b>	<b>ELECTRIC POWER SERVICES</b>		<b>\$ 230,043.28</b>
<b>4</b> <b>R.B. PROPERTIES, CORP.</b> <b>PO BOX 195577</b> <b>SAN JUAN PR 00919-5577</b>	Phone: 787-788-4500 <b>R.B. PROPERTIES, CORP.</b> <b>PO BOX 195577</b> <b>SAN JUAN PR 00919-5577</b>	<b>RENT IN ARREARS</b>		<b>\$ 200,570.28</b>

Debtor(s)

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

Name of Creditor and Complete Mailing Address Including Zip Code	Name, Telephone Number and Complete Mailing Address, Including Zip Code, of Employee, Agent, or Department of Creditor Familiar with Claim Who May Be Contacted	Nature of Claim (Trade Debt, Bank Loan, Government Contract, etc.)	Indicate if Claim is Contingent, Unliquidated, Disputed, or Subject to Setoff	Amount of Claim (If Secured Also State Value of Security)
5 CAPRI, S.E. PO BOX 363148 SAN JUAN PR 00936-3148	Phone: 787-729-0050 CAPRI, S.E. PO BOX 363148 SAN JUAN PR 00936-3148	RENT IN ARREARS		\$ 158,360.65
6 SANTA ROSA MALL, LLC PO BOX 78327 SAN JUAN PR 00936-8327	Phone: 787-579-3728 SANTA ROSA MALL, LLC PO BOX 78327 SAN JUAN PR 00936-8327	RENT IN ARREARS		\$ 142,921.06
7 ANTONIO ROIG SUCESTORES, INC. PO BOX 458 Humacao PR 00791	Phone: 787-852-0404 ANTONIO ROIG SUCESTORES, INC. PO BOX 458 Humacao PR 00791	RENT IN ARREARS		\$ 136,491.23
8 B & Y WHOLESALE DISTRIBUTORS 204 SAN MARCOS AVENUE EL COMANDANTE INDUSTRIAL Carolina PR 00982	Phone: 787-768-5555 B & Y WHOLESALE DISTRIBUTORS 204 SAN MARCOS AVENUE EL COMANDANTE INDUSTRIAL Carolina PR 00982	INVENTORY PURCHASES		\$ 135,385.38
9 P.D.C.M. ASSOCIATES, S.E. PO BOX 195579 SAN JUAN PR 00919-5579	Phone: 787-701-6067 P.D.C.M. ASSOCIATES, S.E. PO BOX 195579 SAN JUAN PR 00919-5579	RENT IN ARREARS		\$ 91,171.15
10 OFFICE PARK, INC. 65 INFANTERIA NORTE CALLE 1 SUITE 2 LAJAS PR 00667	Phone: 787-808-2000 OFFICE PARK, INC. 65 INFANTERIA NORTE CALLE 1 SUITE 2 LAJAS PR 00667	RENT IN ARREARS		\$ 90,440.00
11 YABUCOA DEVELOPMENT, S.E. PO BOX 195579 SAN JUAN PR 00919-5579	Phone: 787-701-6067 YABUCOA DEVELOPMENT, S.E. PO BOX 195579 SAN JUAN PR 00919-5579	RENT IN ARREARS		\$ 80,332.83

Debtor(s)

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

Name of Creditor and Complete Mailing Address Including Zip Code	Name, Telephone Number and Complete Mailing Address, Including Zip Code, of Employee, Agent, or Department of Creditor Familiar with Claim Who May Be Contacted	Nature of Claim (Trade Debt, Bank Loan, Government Contract, etc.)	Indicate if Claim is Contingent, Unliquidated, Disputed, or Subject to Setoff	Amount of Claim (If Secured Also State Value of Security)
12 LA RAMBLA PLAZA, CORP. 606 AVENIDA TITO CASTRO SUITE 325 Ponce PR 00716-0210	Phone: 787-840-1313 LA RAMBLA PLAZA, CORP. 606 AVENIDA TITO CASTRO SUITE 325 Ponce PR 00716-0210	RENT IN ARREARS		\$ 79,834.72
13 VILLA BLANCA PLAZA, LLC PO BOX 362983 SAN JUAN PR 00936-2983	Phone: 787-622-9600 VILLA BLANCA PLAZA, LLC PO BOX 362983 SAN JUAN PR 00936-2983	RENT IN ARREARS		\$ 77,564.83
14 STATE INSURANCE FUND CORP. P.O. BOX 365028 San Juan PR 00936-5028	Phone: 787-793-6957 STATE INSURANCE FUND CORP. P.O. BOX 365028 San Juan PR 00936-5028	WORKMEN'S COMPENSATION INSURANCE		\$ 74,857.11
15 TOMAX CORPORATION 224 SOUTH 200 WEST Salt Lake City UT 84101	Phone: 1-801-990-0909 TOMAX CORPORATION 224 SOUTH 200 WEST Salt Lake City UT 84101	SOFTWARE SUPPORT SERVICES		\$ 66,000.00
16 BAY VIEW PROPERTIES, INC. 115 AVENUE BARBOSA - ALTOS Catano PR 00962	Phone: 787-788-1276 BAY VIEW PROPERTIES, INC. 115 AVENUE BARBOSA - ALTOS CATANO PR 00962	RENT IN ARREARS		\$ 56,807.11
17 MARIA P. HERNANDEZ URB. BONNEVILLE VALLEY SAGRADA FAMILIA #36 Caguas PR 00725	Phone: MARIA P. HERNANDEZ URB. BONNEVILLE VALLEY SAGRADA FAMILIA #36 Caguas PR 00725	SUITS - CLAIM FOR UNJUSTIFIED		\$ 35,610.00
18 INTERIORES VAB RR-12 BOX 1145 Bayamon PR 00959	Phone: 787-312-4259 INTERIORES VAB RR-12 BOX 1145 Bayamon PR 00959	LEASEHOLD IMPROVEMENTS		\$ 35,000.00

Debtor(s)

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

Name of Creditor and Complete Mailing Address Including Zip Code	Name, Telephone Number and Complete Mailing Address, Including Zip Code, of Employee, Agent, or Department of Creditor Familiar with Claim Who May Be Contacted	Nature of Claim (Trade Debt, Bank Loan, Government Contract, etc.)	Indicate if Claim is Contingent, Unliquidated, Disputed, or Subject to Setoff	Amount of Claim (If Secured Also State Value of Security)
19 MUNICIPIO DE SAN JUAN DEPARTAMENTO DE FINANZAS P.O. BOX 70179 San Juan PR 00936-8179	Phone: MUNICIPIO DE SAN JUAN DEPARTAMENTO DE FINANZAS P.O. BOX 70179 San Juan PR 00936-8179	MUNICIPAL TAXES		\$ 22,469.13
20 BPP RETAIL PROPERTIES, LLC PO BOX 71507 SAN JUAN PR 00936-8607	Phone: BPP RETAIL PROPERTIES, LLC PO BOX 71507 SAN JUAN PR 00936-8607	RENT IN ARREARS		\$ 20,142.60

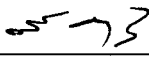
Debtor(s)

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

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION**

I, MOHAMMAD YASSIN, President of the Corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing List of Creditors Holding Twenty Largest Unsecured Claims and that they are true and correct to the best of my knowledge, information and belief.

Date: 2/24/2011

Signature   
Name: MOHAMMAD YASSIN  
Title: President