

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

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>KIKE TRANSPORT INC.</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):	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>66-0677477</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, State & Zip Code): <b>CARRETERA 150 SECTOR CENTRAL BASE AEREA MUNIZ CAROLINA, PR</b>	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):
ZIPCODE <b>00984-1509</b>	ZIPCODE
County of Residence or of the Principal Place of Business: <b>Carolina</b>	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <b>PO BOX 1509 CAROLINA, PR</b>	Mailing Address of Joint Debtor (if different from street address):
ZIPCODE <b>00984-1509</b>	ZIPCODE

Location of Principal Assets of Business Debtor (if different from street address above):  
**CARRETERA 150 SECTOR CENTRAL, BASE AEREA MUNIZ, CAROLINA, PR**

ZIPCODE **00984**

<p align="center"><b>Type of Debtor</b> (Form of Organization) (Check one box.)</p> <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.)	<p align="center"><b>Nature of Business</b> (Check one box.)</p> <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	<p align="center"><b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.)</p> <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
<p align="center"><b>Chapter 15 Debtor</b></p> Country of debtor's center of main interests: _____  Each country in which a foreign proceeding by, regarding, or against debtor is pending: _____	<p align="center"><b>Tax-Exempt Entity</b> (Check box, if applicable.)</p> <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<p align="center"><b>Nature of Debts</b> (Check one box.)</p> <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.

<p align="center"><b>Filing Fee</b> (Check one box)</p> <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 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.	<p align="center"><b>Chapter 11 Debtors</b></p> <p><b>Check one box:</b></p> <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <p><b>Check if:</b></p> <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). ----- <p><b>Check all applicable boxes:</b></p> <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).
---	--

<p><b>Statistical/Administrative Information</b></p> <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.	THIS SPACE IS FOR COURT USE ONLY																				
<p>Estimated Number of Creditors</p> <table style="width:100%; text-align: center;"> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000-5,000</td> <td>5,001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>50,001-100,000</td> <td>Over 100,000</td> </tr> </table>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000												
<p>Estimated Assets</p> <table style="width:100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion												
<p>Estimated Liabilities</p> <table style="width:100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion												

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>KIKE TRANSPORT INC.</b>
---	--

**Prior Bankruptcy Case 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 align="center"><b>Exhibit A</b></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.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.	<p align="center"><b>Exhibit B</b></p> (To be completed if debtor is an individual whose debts are primarily consumer debts.)  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 delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.  X _____ Signature of Attorney for Debtor(s) <span style="float:right">Date</span>
---	---

**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 a part of this petition.

If this is a joint petition:

Exhibit D also completed and signed by the joint debtor is attached a 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 or 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 or lessor that obtained judgment)

\_\_\_\_\_  
(Address of landlord or lessor)

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 in 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):  
**KIKE TRANSPORT INC.**

**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 State 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 /s/ Maria Mercedes Figueroa Y Morgade

Signature of Attorney for Debtor(s)

**Maria Mercedes Figueroa Y Morgade**  
**Figueroa y Morgade Law**  
**3415 Alejandro Ave. Apt. 703**  
**Guaynabo,, PR 00969-4856**  
**(787) 234-3981**  
**figueroaymorgadelaw@yahoo.com**

**December 13, 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 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); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by 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

**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 /s/ JOSE ENRIQUE GONZALEZ COLON

Signature of Authorized Individual

**JOSE ENRIQUE GONZALEZ COLON**

Printed Name of Authorized Individual

**PRESIDENTE**

Title of Authorized Individual

**December 13, 2011**

Date

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

\_\_\_\_\_  
Date

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.*

Kike Transport, Inc.  
P.O. Box 2006, Carolina  
Puerto Rico 00984

I, Iris Cordero, of legal age, single and resident of Carolina Puerto Rico, appearing here as Secretary and in representative capacity of Kike Transport, Inc., a duly organized corporation under the laws of the Commonwealth of Puerto Rico, whose tax identification number is XX-XXX7477 certify as follows:

Whereas: The Board of Directors of Kike Transport, Inc., has authorized **José Enrique González Colon**, of legal age, single and resident of Cataño Puerto Rico to represent the corporation in the filing of a voluntary Bankruptcy petition under Chapter 11 of the United States Bankruptcy Code, 11 USC 101, et seq. and to execute all documents on behalf and in representation of Kike Transport, Inc., including retaining the legal services of Maria Mercedes Figueroa y Morgade Esq. for this matter.

The undersigned hereby certifies that the Board of Directors of Kike Transport, Inc., adopted this resolution at a duly constituted meeting held on December 13, 2011.

In witness hereof, I have hereunto set my hand and affixed the seal of the corporation this 13<sup>th</sup> day of December of 2011.



*Iris Cordero Cordero*  
Secretary

**Document Page 5 of 18**  
**United States Bankruptcy Court**  
**District of Puerto Rico**

**IN RE:**

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

**KIKE TRANSPORT INC.**

Chapter **11**

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).

(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.)	(4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff	(5) Amount of claim (if secured also state value of security)
<b>PR Treasury Department</b> 235 Arterial Hostos Ave. 12 Floor San Juan, PR 00918		<b>withholding taxes</b>		<b>279,710.00</b>
<b>Internal Revenue Service</b> PO Box 80110 Cincinnati, OH 45280-0010		<b>withholding taxes</b>		<b>246,124.51</b>
<b>Airport Aviation Services</b> PO Box 38093 San Juan, PR 00937		<b>Trade debt</b>		<b>87,545.96</b>
<b>Cargo Service Corporation</b> PO Box 38093 San Juan, PR 00937		<b>Lease payment</b>	<b>Contingent Unliquidated Disputed Subject to Setoff</b>	<b>56,974.87</b>
<b>Municipality Of Carolina</b> Apartado 8 Carolina, PR 00986		<b>municipal taxes</b>	<b>Contingent Unliquidated Disputed</b>	<b>56,850.65</b>
<b>Cargo Service Corporation</b> PO Box 38093 San Juan, PR 00937		<b>Lease payment</b>	<b>Contingent Unliquidated Disputed</b>	<b>39,660.00</b>
<b>First Bank</b> 1519 Ponce De Leon Ave. San Juan,, PR 00908		<b>Bank loan</b>		<b>34,512.38</b>
<b>State Insurance Fund (FSE)</b> PO Box 365028 San Juan, PR 00936-5028		<b>Workman compensation</b>	<b>Contingent Unliquidated Disputed</b>	<b>32,000.00</b>
<b>Puerto Rico Department Of Labor</b> 505 Munoz Rivera Ave. San Juan, PR 00917		<b>withholding taxes</b>		<b>26,807.25</b>
<b>First Bank</b> 1519 Ponce De Leon Ave. San Juan,, PR 00908		<b>Bank loan</b>		<b>23,731.83</b>
<b>First Bank</b> 1519 Ponce De Leon Ave. San Juan,, PR 00908		<b>Bank loan</b>		<b>18,290.00</b>
<b>PREPA</b> P O Box 364267 San Juan, PR 00936-4267		<b>power services</b>		<b>11,828.84</b>

Favio Cruz Cintron Calle 1 Parcela 140 Barrio San Isidro Canovanas, PR 00729		Contingent Unliquidated Disputed	7,356.80
Comision De Servicio Publico PO Box 190870 San Juan, PR 00919-0870	Trade debt		5,011.85
Iris Nerida Huertas Rodriguez PO Box 1887 Carolina, PR 00984-1887	Salary claim	Contingent Unliquidated Disputed	4,000.00
PREPA P O Box 364267 San Juan, PR 00936-4267	power services		3,072.35
CON WASTE P O Box 1322 Gurabo, PR 00778	vendor		2,608.96
Johnny Rivera Maldonado PO Box 877 Aguadilla, PR 00605		Contingent Unliquidated Disputed	2,424.80
Iris Nerida Huertas Rodriguez PO Box 1887 Carolina, PR 00984-1887	Salary/bonus claim		2,400.00
Omar Monteagudo Calle Italia 529 Ext. El Comandante Carolina, PR 00982	professional services		1,050.00

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

I, [the president *or* other officer *or* an authorized agent of the corporation][*or* a member *or* an authorized agent of the partnership] named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date: December 13, 2011 Signature: /s/ JOSE ENRIQUE GONZALEZ COLON

JOSE ENRIQUE GONZALEZ COLON, PRESIDENTE

(Print Name and Title)

**Document Page 7 of 18**  
**United States Bankruptcy Court**  
**District of Puerto Rico**

**IN RE:**

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

**KIKE TRANSPORT INC.**

Chapter **11**

Debtor(s)

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 58,800.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 20,647.74	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 525,834.51	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$ 416,850.54	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	No				\$
J - Current Expenditures of Individual Debtor(s)	No				\$
<b>TOTAL</b>		<b>14</b>	<b>\$ 58,800.00</b>	<b>\$ 963,332.79</b>	

B6D (Official Form 6D) (12/07)

IN RE KIKE TRANSPORT INC.

Debtor(s)

Case No.

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, 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). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 023019471500144807 Popular Auto P O Box 362708 San Juan, PR 00936-2708		UCC financing agreement for a MACK 2000 Incurred on April 4, 2011  VALUE \$ 14,000.00				5,489.50	
ACCOUNT NO. 023019471500144849 Popular Auto P O Box 362708 San Juan, PR 00936-2708		UCC Financing Agreement incurred in April 4, 2008 Freightliner 2000  VALUE \$ 14,000.00				5,489.50	
ACCOUNT NO. 023019471500092064 Popular Auto P O Box 362708 San Juan, PR 00936-2708		UCC Financing Agreement dated August 28, 2007. 2000 MACK Day Cab Tractor  VALUE \$ 13,800.00				4,435.13	
ACCOUNT NO. 0230019471500081869 Popular Auto P O Box 362708 San Juan, PR 00936-2708		UCC Financing Agreement dated July 18, 2007 2002 International Day Cab Tractor  VALUE \$ 17,000.00				5,233.61	
Subtotal (Total of this page)						\$ 20,647.74	\$
Total (Use only on last page)						\$ 20,647.74	\$

continuation sheets attached

(Report also on Summary of Schedules.)  
(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)



IN RE KIKE TRANSPORT INC.

Debtor(s)

Case No.

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

- Domestic Support Obligations
Extensions of credit in an involuntary case
Wages, salaries, and commissions
Contributions to employee benefit plans
Certain farmers and fishermen
Deposits by individuals
Taxes and Certain Other Debts Owed to Governmental Units
Commitments to Maintain the Capital of an Insured Depository Institution
Claims for Death or Personal Injury While Debtor Was Intoxicated

\* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

IN RE KIKE TRANSPORT INC.

Debtor(s)

Case No.

(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
**(Continuation Sheet)**

**Taxes and Other Certain Debts Owed to Governmental Units**

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT		AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
			UNLIQUIDATED	DISPUTED			
ACCOUNT NO. 7477 Internal Revenue Service PO Box 80110 Cincinnati, OH 45280-0010		941 PR 2007-2010			246,124.51	246,124.51	
ACCOUNT NO. 7477 PR Treasury Department 235 Arterial Hostos Ave. 12 Floor San Juan, PR 00918		withholding taxes 2008-2010			279,710.00	279,710.00	
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							

Sheet no. 1 of 1 continuation sheets attached to  
 Schedule of Creditors Holding Unsecured Priority Claims

Subtotal  
 (Totals of this page)

\$ 525,834.51	\$ 525,834.51	\$
---------------	---------------	----

Total  
 (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

\$ 525,834.51		
---------------	--	--

Total  
 (Use only on last page of the completed Schedule E. If applicable,  
 report also on the Statistical Summary of Certain Liabilities and Related Data.)

	\$ 525,834.51	\$
--	---------------	----

IN RE **KIKE TRANSPORT INC.**

Debtor(s)

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

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>K006&amp;K007</b> <b>Airport Aviation Services</b> <b>PO Box 38093</b> <b>San Juan, PR 00937</b>		<b>Fuel supplies and electric power services</b>				<b>87,545.96</b>
ACCOUNT NO. <b>W11000</b> <b>Cargo Service Corporation</b> <b>PO Box 38093</b> <b>San Juan, PR 00937</b>		<b>Accrued lease payments to August 31, 2011.</b> <b>Subject to Setoff</b>	X	X	X	<b>56,974.87</b>
ACCOUNT NO. <b>W11000</b> <b>Cargo Service Corporation</b> <b>PO Box 38093</b> <b>San Juan, PR 00937</b>		<b>Lease payments for the months of November and December 2011</b>	X	X	X	<b>39,660.00</b>
ACCOUNT NO. <b>TCG6013</b> <b>Comision De Servicio Publico</b> <b>PO Box 190870</b> <b>San Juan, PR 00919-0870</b>		<b>Fines and royalties</b>				<b>5,011.85</b>

3 continuation sheets attached

Subtotal  
(Total of this page) \$ **189,192.68**

Total  
(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules and, if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.) \$

IN RE KIKE TRANSPORT INC.

Debtor(s)

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

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS  
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>KAC 2009-0926</b> <b>Comisionado De Seguros</b> <b>PO Box 190870</b> <b>San Juan, PR 00919-0870</b>		<b>Unpaid Medical Insurance Premium</b>				<b>724.00</b>
ACCOUNT NO. <b>200003177</b> <b>CON WASTE</b> <b>P O Box 1322</b> <b>Gurabo, PR 00778</b>		<b>Garbage Disposal Service</b>				<b>2,608.96</b>
ACCOUNT NO. <b>A7D2DP10009</b> <b>Favio Cruz Cintron</b> <b>Calle 1 Parcela 140 Barrio San Isidro</b> <b>Canovanas, PR 00729</b>		<b>Claim for unfair employment termination</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>7,356.80</b>
ACCOUNT NO. <b>00012270137247</b> <b>First Bank</b> <b>1519 Ponce De Leon Ave.</b> <b>San Juan,, PR 00908</b>		<b>Outstanding Deficiency after surrender of 2008 Mercedes Benz C-300 to FB</b>				<b>18,290.00</b>
ACCOUNT NO. <b>00012270138379</b> <b>First Bank</b> <b>1519 Ponce De Leon Ave.</b> <b>San Juan,, PR 00908</b>		<b>Outstanding Deficiency amount after surrender of 2008 Ford 550 to FB</b>				<b>34,512.38</b>
ACCOUNT NO. <b>00012270137952</b> <b>First Bank</b> <b>1519 Ponce De Leon Ave.</b> <b>San Juan,, PR 00908</b>		<b>Outstanding Deficiency after surrender of 2009 Jaguar to FB</b>				<b>23,731.83</b>
ACCOUNT NO. <b>A7D1MISC 11 10</b> <b>Iris Nerida Huertas Rodriguez</b> <b>PO Box 1887</b> <b>Carolina, PR 00984-1887</b>		<b>Salary Claim at the Department of Labor of Puerto Rico</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>4,000.00</b>

Sheet no. 1 of 3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) \$ **91,223.97**

Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

IN RE KIKE TRANSPORT INC.

Debtor(s)

Case No.

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS  
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>A7D1BN2710</b> <b>Iris Nerida Huertas Rodriguez</b> PO Box 1887 Carolina, PR 00984-1887		<b>Christmas Bonus Claim</b> <b>Administrative proceeding at the Department of Labor of Puerto Rico</b>				<b>2,400.00</b>
ACCOUNT NO. <b>AACI 2011-01641</b> <b>Johnny Rivera Maldonado</b> PO Box 877 Aguadilla, PR 00605		<b>Claim for unfair employment termination</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>2,424.80</b>
ACCOUNT NO. <b>727835</b> <b>Municipality Of Carolina</b> Apartado 8 Carolina, PR 00986		<b>Munipal taxes 2007 to 2010</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>56,850.65</b>
ACCOUNT NO. <b>Omar Monteagudo</b> Calle Italia 529 Ext. El Comandante Carolina, PR 00982		<b>Professional services : accountant</b>				<b>1,050.00</b>
ACCOUNT NO. <b>01104886240034</b> <b>PREPA</b> P O Box 364267 San Juan, PR 00936-4267		<b>Power Services</b>				<b>11,828.84</b>
ACCOUNT NO. <b>01104922790031</b> <b>PREPA</b> P O Box 364267 San Juan, PR 00936-4267		<b>Power Services</b>				<b>3,072.35</b>
ACCOUNT NO. <b>3467640002</b> <b>Puerto Rico Department Of Labor</b> 505 Munoz Rivera Ave. San Juan, PR 00917		<b>Unemployment and disability 2007-2010</b>				<b>26,807.25</b>

Sheet no. 2 of 3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page) \$ **104,433.89**

Total  
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

IN RE KIKE TRANSPORT INC.

Debtor(s)

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

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS  
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>0718000811-2012</b> <b>State Insurance Fund (FSE)</b> <b>PO Box 365028</b> <b>San Juan, PR 00936-5028</b>			X	X	X	<b>32,000.00</b>
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. 3 of 3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page) \$ **32,000.00**

(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)  
Total  
\$ **416,850.54**

IN RE KIKE TRANSPORT INC. Debtor(s) Case No. \_\_\_\_\_ (If known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Debtor

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ (Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

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 chargeable by 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 by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer \_\_\_\_\_ Social Security No. (Required by 11 U.S.C. § 110.)  
*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address \_\_\_\_\_

Signature of Bankruptcy Petition Preparer \_\_\_\_\_ Date \_\_\_\_\_

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 signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provision 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.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **PRESIDENTE** \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the **KIKE TRANSPORT INC.**

(corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 15 sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: **December 13, 2011** Signature: **/s/ JOSE ENRIQUE GONZALEZ COLON**

**JOSE ENRIQUE GONZALEZ COLON**

(Print or type name of individual signing on behalf of debtor)

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

Document Page 16 of 18
United States Bankruptcy Court
District of Puerto Rico

IN RE:

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

KIKE TRANSPORT INC.

Chapter 11

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 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 ..... \$ 200.00/hr

Prior to the filing of this statement I have received ..... \$ 10,000.00

Balance Due ..... \$ \_\_\_\_\_

2. The source of the compensation paid to me was: [X] Debtor [ ] Other (specify):

3. The source of compensation to be paid to me is: [X] Debtor [ ] Other (specify):

4. [X] 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 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, statement 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]

Drafting the Disclosure Statement and Reorganization Plan.

All matters involving the Debtor's reorganization process; pre and post confirmation.

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

Appeals of any kind.

© 1993-2011 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

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 this bankruptcy proceeding.

December 13, 2011

Date

/s/ Maria Mercedes Figueroa Y Morgade

Maria Mercedes Figueroa Y Morgade
Figueroa y Morgade Law
3415 Alejandrino Ave. Apt. 703
Guaynabo,, PR 00969-4856
(787) 234-3981
figueroaymorgadelaw@yahoo.com



KIKE TRANSPORT INC  
PO BOX 1509  
CAROLINA PR 00984-1509

FIRST BANK  
ACCT# 00012270138379  
1519 PONCE DE LEON AVE  
SAN JUAN, PR 00908

POPULAR AUTO  
ACCT# 023019471500144807  
P O BOX 362708  
SAN JUAN PR 00936-2708

FIGUEROA Y MORGADE LAW  
3415 ALEJANDRINO AVE APT 703  
GUAYNABO, PR 00969-4856

FIRST BANK  
ACCT# 00012270137952  
1519 PONCE DE LEON AVE  
SAN JUAN, PR 00908

POPULAR AUTO  
ACCT# 023019471500144849  
P O BOX 362708  
SAN JUAN PR 00936-2708

AIRPORT AVIATION SERVICES  
ACCT# K006&K007  
PO BOX 38093  
SAN JUAN PR 00937

INTERNAL REVENUE SERVICE  
ACCT# 7477  
PO BOX 80110  
CINNINATI OH 45280-0010

POPULAR AUTO  
ACCT# 023019471500092064  
P O BOX 362708  
SAN JUAN PR 00936-2708

CARGO SERVICE CORPORATION  
ACCT# W11000  
PO BOX 38093  
SAN JUAN PR 00937

IRIS NERIDA HUERTAS RODRIGUEZ  
PO BOX 2006  
CAROLINA PR 00984-2006

POPULAR AUTO  
ACCT# 0230019471500081869  
P O BOX 362708  
SAN JUAN PR 00936-2708

COMISION DE SERVICIO PUBLICO  
ACCT# TCG6013  
PO BOX 190870  
SAN JUAN PR 00919-0870

IRIS NERIDA HUERTAS RODRIGUEZ  
ACCT# A7D1MISC 11 10  
PO BOX 1887  
CAROLINA PR 00984-1887

PR TREASURY DEPARTMENT  
ACCT# 7477  
235 ARTERIAL HOSTOS AVE 12 FLOOR  
SAN JUAN PR 00918

COMISIONADO DE SEGUROS  
ACCT# KAC 2009-0926  
PO BOX 190870  
SAN JUAN PR 00919-0870

IRIS NERIDA HUERTAS RODRIGUEZ  
ACCT# A7D1BN2710  
PO BOX 1887  
CAROLINA PR 00984-1887

PREPA  
ACCT# 01104886240034  
P O BOX 364267  
SAN JUAN PR 00936-4267

CON WASTE  
ACCT# 200003177  
P O BOX 1322  
GURABO PR 00778

IVAN GIL ROSADO ALFONSO  
PO BOX 195015  
SAN JUAN PR 00919

PREPA  
ACCT# 01104922790031  
P O BOX 364267  
SAN JUAN PR 00936-4267

CRIM  
PO BOX 195387  
SAN JUAN PR 00936-5387

JOHNNY RIVERA MALDONADO  
ACCT# AACI 2011-01641  
PO BOX 877  
AGUADILLA PR 00605

PUERTO RICO DEPARTMENT OF LABOR  
ACCT# 3467640002  
505 MUNOZ RIVERA AVE  
SAN JUAN PR 00917

FAVIO CRUZ CINTRON  
ACCT# A7D2DP10009  
CALLE 1 PARCELA 140 BARRIO SAN ISIDRO  
CANOVANAS PR 00729

MUNICIPALITY OF CAROLINA  
ACCT# 727835  
APARTADO 8  
CAROLINA PR 00986

RICARDO PAVIA CABANILLAS  
ATTORNEY FOR IRIS N HUERTAS  
PO BOX 9066612  
SAN JUAN PR 00906-6612

FIRST BANK  
ACCT# 00012270137247  
1519 PONCE DE LEON AVE  
SAN JUAN, PR 00908

OMAR MONTEAGUDO  
CALLE ITALIA 529 EXT EL COMANDANTE  
CAROLINA PR 00982

STATE INSURANCE FUND (FSE)  
ACCT# 0718000811-2012  
PO BOX 365028  
SAN JUAN PR 00936-5028

Document Page 18 of 18  
United States Bankruptcy Court  
District of Puerto Rico

IN RE:

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

\_\_\_\_\_  
KIKE TRANSPORT INC.

Chapter **11** \_\_\_\_\_

Debtor(s)

**VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: December 13, 2011

Signature: /s/ JOSE ENRIQUE GONZALEZ COLON

JOSE ENRIQUE GONZALEZ COLON, PRESIDENTE

Debtor

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Joint Debtor, if any