B1 (Official Form 1) (4/13)	Document	Page 1 of 13		
	United States Bankruptcy		Voluntary Petition	
	DISTRICT OF PUER	TO RICO		
Name of Debtor (if individual, enter Last, First, M	iddle):	Name of Joint Debtor (Spouse)(Last, First, Mi	ddle):	
OMEGA SERVICES, CORP.				
All Other Names used by the Debtor in the la (include married, maiden, and trade names): NONE	ist 8 years	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 Indvidual-Taxpayer I (if more than one, state all): 66-0772141	.D. (ITIN) No./Complete EIN	Last four digits of Soc. Sec. or Indvidual-Taxpayer (if more than one, state all):	I.D. (ITIN) No./Complete EIN	
Street Address of Debtor (No. & Street, City CARR. 877, KM. 0.7	, and State):	Street Address of Joint Debtor (No. & St	reet, City, and State):	
BO. SABANA LLANA San Juan, PR	ZIPCODE 00929	-	ZIPCODE	
County of Residence or of the Principal Place of Business:		County of Residence or of the Principal Place of Business:		
Mailing Address of Debtor (if different from s	street address):	Mailing Address of Joint Debtor (if differ	ent from street address):	
P.O. BOX 1198				
SAINT JUST STATION	ZIPCODE		ZIPCODE	
Saint Just, PR Location of Principal Assets of Business Deb	00978-1198			
(if different from street address above): SAME	101		ZIPCODE	
Type of Debtor (Form of organization) (Check one box.) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ○ Corporation (includes LLC and LLP) □ Partnership ○ Other (if debtor is not one of the above entities, check this box and state type of entity below	Nature of Business (Check one box.) Health Care Business Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank Other	Chapter 9 Chapter 11 Chapter 12 Chapter 13	Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding heck one box) Efined I Debts are primarily business debts.	
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable.) Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter 11 Debto Check one box: Debtor is a small business as defined in 11 Debtor is not a small business debtor as de	1 U.S.C. § 101(51D).	
Filing Fee (Check Image: Second state of the state of	to individuals only). Must ation certifying that the debtor 1006(b). See Official Form 3A. er 7 individuals only). Must	 Check if: Debtor's aggregate noncontingent liquidat owed to insiders or affiliates) are less than on 4/01/16 and every three years thereafter). Check all applicable boxes: A plan is being filed with this petition Acceptances of the plan were solicited pr 	\$2,490,925 (amount subject to adjustment)	
Statistical/Administrative Information		classes of creditors, in accordance with 1	TU.S.C. § 1126(b). This space is for court use only	

Statistical	/Administrat	ive Informat	tion							THIS SPACE IS FOR COURT USE ONLY
Debtor of	estimates that fu	inds will be ava	ilable for distri	bution to unsec	ured creditors.					
	estimates that, a tion to unsecure		t property is exe	cluded and adm	inistrative expe	nses paid, there	will be no fund	ls available for		
	Jumber of Cre	editors								Ĩ
\boxtimes										
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	
Estimated A	Assets									
\$0 to	\$50,001 to	\$100,001 to	\$500,001	\$1,000,001	\$10,000,001	\$50,000,001	\$100,000,001	\$500,000,001	More than	
\$50,000	\$100,000	\$500,000	to \$1	to \$10	to \$50	to \$100	to \$500	to \$1 billion	\$1 billion	
			million	million	million	million	million			
Estimated I	iabilities									1
		\boxtimes								
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10	\$10,000,001 to \$50	\$50,000,001 to \$100	\$100,000,001 to \$500	\$500,000,001 to \$1 billion	More than \$1 billion	1
\$50,000	\$100,000	\$500,000	million	million	million	million	million	to \$1 0111011	φi oπion	1

B1 (Official Form 1) (4/13)	ocument Page 2 of 13	FORM B1, Page 2
Voluntary Petition	Name of Debtor(s):	
(This page must be completed and filed in every case)	OMEGA SERVICES, CON	RP.
All Prior Bankruptcy Cases Filed Within I		
Location Where Filed:	Case Number:	Date Filed:
NONE		
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Aft	filiate of this Debtor (If more than c	one, attach additional sheet)
Name of Debtor:	Case Number:	Date Filed:
NONE		
District:	Relationship:	Judge:
Exhibit A (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)	whose debts a I, the attorney for the petitioner named have informed the petitioner that [he or or 13 of title 11, United States Code, at	r she] may proceed under chapter 7, 11, 12 nd have explained the relief available under I have delivered to the debtor the notice
	Signature of Attorney for Debtor(s)	7/10/2014 Date
	Exhibit C	
Does the debtor own or have possession of any property that poses or safety? Yes, and exhibit C is attached and made a part of this petition No		fiable harm to public health
 (To be completed by every individual debtor. If a joint petition is fi Exhibit D, completed and signed by the debtor, is attached a If this is a joint petition: Exhibit D also completed and signed by the joint debtor is a 	and made part of this petition.	te Exhibit D.)
Info	rmation Regarding the Debtor - Venue	
 Debtor has been domiciled or has had a residence, principal pla preceding the date of this petition or for a longer part of such 18 There is a bankruptcy case concerning debtor's affiliate, general Debtor is a debtor in a foreign proceeding and has its principal place of business or assets in the United States but is a the interests of the parties will be served in regard to the relief set. 	30 days than in any other District. I partner, or partnership pending in this District. place of business or principal assets in the United St defendant in an action proceeding [in a federal or s	tates in this District, or has no
	-	
	tor Who Resides as a Tenant of Residential Pro heck all applicable boxes.)	perty
Landlord has a judgment against the debtor for possession	· · · ·	e following.)
	(Name of landlord that obtained	d judgment)
	(Address of landlord)	
Debtor claims that under applicable nonbankruptcy law, t entire monetary default that gave rise to the judgment for		
Debtor has included with this petition the deposit with the period after the filing of the petition.	court of any rent that would become due during th	e 30-day
Debtor certifies that he/she has served the Landlord with t	his certification. (11 U.S.C. § 362(1)).	

Case:14-05656-11 Doc#:1 Filed:07/1	
	nt Page 3 of 13 FORM B1, Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	OMEGA SERVICES, CORP.
Si	ignatures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Fousier Domuscontative
I declare under penalty of perjury that the information provided in this	Signature of a Foreign Representative
petition is true and correct.	I declare under penalty of perjury that the information provided in this
[If petitioner is an individual whose debts are primarily consumer debts	petition is true and correct, that I am the foreign representative of a debtor
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,	in a foreign proceeding, and that I am authorized to file this petition.
understand the relief available under each such chapter, and choose to	(Check only one box.)
proceed under chapter 7.	☐ I request relief in accordance with chapter 15 of title 11, United States
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by	Code. Certified copies of the documents required by 11 U.S.C. § 1515
11 U.S.C. §342(b)	are attached.
I request relief in accordance with the chapter of title 11, United States	Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the
Code, specified in this petition.	chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
v	order granting recognition of the foreign main proceeding is attached.
Signature of Debtor	X
X	(Signature of Foreign Representative)
Signature of Joint Debtor	
	(Printed name of Foreign Representative)
Telephone Number (if not represented by attorney)	
	(Date)
Date	
Signature of Attorney*	Signature of Non-Attorney Bankruptcy Petition Preparer
X /s/ Alexis fuentes-hernandez	
Signature of Attorney for Debtor(s)	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
ALEXIS FUENTES-HERNANDEZ 217201 Printed Name of Attorney for Debtor(s)	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
ALEXIS FUENTES-HERNANDEZ	pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services
Firm Name	bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor
P.O.BOX 9022726 Address	or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
144(05)	rom ry is addited.
SAN JUAN, PR 00902-2726	
787-607-3436	Printed Name and title, if any, of Bankruptcy Petition Preparer
Telephone Number	Social-Security number (If the bankruptcy petition preparer is not an
7/10/2014	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.)
*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.	Address
Signature of Debtor (Corporation/Partnership)	
I declare under penalty of perjury that the information provided	X
in this petition is true and correct, and that I have been	
authorized to file this petition on behalf of the debtor.	Date Signature of bankruptcy petition preparer or officer, principal,
The debtor requests the relief in accordance with the chapter of	responsible person, or partner whose Social-Security number is provided
title 11, United States Code, specified in this petition.	Names and Social-Security numbers of all other individuals who prepared
X /s/ LUIS J. CRESPO	or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.
Signature of Authorized Individual	
LUIS J. CRESPO	
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
General Manager	
Title of Authorized Individual 7/10/2014	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.
7/10/2014 Date	imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Rule 2016(b) @ 5e:14-05656-11 Doc#:1 Filed:07/10/14 Entered:07/10/14 12:22:33 Desc: Main Document Page 4 of 13

UNITED STATES BANKRUPTCY COURT DISTRICT OF PUERTO RICO

In re OMEGA SERVICES, CORP.

Case No. Chapter 11

/ Debtor

Attorney for Debtor: ALEXIS FUENTES-HERNANDEZ

STATEMENT PURSUANT TO RULE 2016(B)

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

- 1. The undersigned is the attorney for the debtor(s) in this case.
- 2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:

a)	For legal services rendered or to be rendered in contemplation of and in	
	connection with this case\$	hourly
b)	Prior to the filing of this statement, debtor(s) have paid	12,000.00

- c) The unpaid balance due and payable is \$______\$____
- 3. \$ 1,717.00 of the filing fee in this case has been paid.
- 4. The Services rendered or to be rendered include the following:
 - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
 - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
 - c) Representation of the debtor(s) at the meeting of creditors.
- The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and *None other*
- The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and *None other*
- The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:
 None
- The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows: None

Dated: 7/10/2014

Respectfully submitted,

X /s/ ALEXIS FUENTES-HERNANDEZ Attorney for Petitioner: ALEXIS FUENTES-HERNANDEZ ALEXIS FUENTES-HERNANDEZ P.O.BOX 9022726 SAN JUAN PR 00902-2726

787-607-3436

UNITED STATES BANKRUPTCY COURT DISTRICT OF PUERTO RICO

In re OMEGA SERVICES, CORP.,

Case No. Chapter 11

/ Debtor

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 must also 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)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	Yes	1	\$ 0.00		
B-Personal Property	Yes	3	\$ 185,000.00		
C-Property Claimed as Exempt	No	0			
D-Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	4		\$ 232,888.09	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$51,862.57	,
G-Executory Contracts and Unexpired Leases	Yes	1			
H-Codebtors	Yes	1			
I-Current Income of Individual Debtor(s)	No	0			\$ 0.00
J-Current Expenditures of Individual Debtor(s)	No	0			\$ 0.00
тот	AL	13	\$ 185,000.00	\$ 284,750.66	

UNITED STATES BANKRUPTCY COURT DISTRICT OF PUERTO RICO

In re OMEGA SERVICES, CORP.,

Case No. Chapter 11

/ Debtor

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$
Student Loan Obligations (from Schedule F)	\$
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$
TOTAL	\$

State the following:

Average Income (from Schedule I, Line 12)	\$
Average Expenses (from Schedule J, Line 22)	\$
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$
4. Total from Schedule F	\$
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$

B6 Declaration (Official Form 4-056 56 56 1 (12/1) OC#:1 Filed:07/10/14 Entered:07/10/14 12:22:33 Desc: Main Document Page 7 of 13

In re OMEGA SERVICES, CORP.,

Case No.

(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY ON BEHALF OF A CORPORATION

LUIS J. CRESPO _____, General Manager ______ of the Corporation 14 sheets, named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of and that they are true and correct to the best of my knowledge, information, and belief.

Date: 7/10/2014

Signature /s/ LUIS J. CRESPO Name: LUIS J. CRESPO Title: General Manager

[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.

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

I certify that I am a bankruptcy preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Preparer:

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

Date:

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.

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.

Debtor

Social security No. :

B4 (Official Form Gase);14-05656-11 Doc#:1 Filed:07/10/14 Entered:07/10/14 12:22:33 Desc: Main Document Page 8 of 13 UNITED STATES BANKRUPTCY COURT DISTRICT OF PUERTO RICO

In re OMEGA SERVICES, CORP.

Case No. 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).

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 Phone:	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) \$ 110,872.56
- INTERNAL REVENUE SERVICE P.O. BOX 21126 PHILADELPHIA PA 19114-0326	INTERNAL REVENUE SERVICE P.O. BOX 21126 PHILADELPHIA PA 19114-0326			,
2 U.S. DEPARTMENT OF LABOR 7 TABANUCO ST., SUITE 402 Guaynabo PR 00968	Phone: U.S. DEPARTMENT OF LABOR SAN PATRICIO OFFICE CENTER 7 TABANUCO ST., SUITE 402 Guaynabo PR 00968	Salaries Owed Per Audit		\$ 43,328.29
3 DEPARTMENT OF TREASURY OF PR PO BOX 9022501 SAN JUAN PR 00902-2501	Phone: <i>DEPARTMENT OF TREASURY OF PR PO BOX 9022501 SAN JUAN PR 00902-2501</i>	IVU		\$ 38,653.43
4 DEPARTMENT OF TREASURY OF PR PO BOX 9022501 SAN JUAN PR 00902-2501	Phone: <i>DEPARTMENT OF TREASURY OF</i> <i>PR</i> <i>PO BOX 9022501</i> <i>SAN JUAN PR 00902-2501</i>	Professional Services Withholding		\$ 34,318.32
5 DEPARTMENT OF LABOR OF PR P.O. BOX 1020 SAN JUAN PR 00919-1020	Phone: DEPARTMENT OF LABOR OF PR P.O. BOX 1020 SAN JUAN PR 00919-1020	SUTA & Disabili Insurance	ity	\$ 29,999.33

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 Clain is Contingent, Unliquidated, Disputed, or Subject to Setoff	
6	Phone:	Municipal Pate	ent	\$ 6,125.23
MUNICIPIO DE TRUJILLO ALTO	MUNICIPIO DE TRUJILLO ALTO			
P.O. BOX 1869 Trujillo Alto PR 00977	P.O. BOX 1869 Trujillo Alto PR 00977			
7	Phone:	Municipal Pate	ent	\$ 5,029.77
MUNICIPIO DE GUAYNABO	MUNICIPIO DE GUAYNABO			
P.O. BOX 7885	P.O. BOX 7885			
Guaynabo PR 00970	Guaynabo PR 00970			
8	Phone:	Continuing Ed	ucation	\$ 4,500.00
CARIBBEAN FORENSIC & TECH	CARIBBEAN FORENSIC & TECH	_		
COLLEGE	COLLEGE			
P.O. BOX 190793	P.O. BOX 190793			
San Juan PR 00910-0793	San Juan PR 00910-0793			
9	Phone:	Employee Witholding		\$ 3,745.91
DEPARTMENT OF TREASURY OF	DEPARTMENT OF TREASURY OF	Taxes	_	
PR	PR			
PO BOX 9022501	PO BOX 9022501			
SAN JUAN PR 00902-2501	SAN JUAN PR 00902-2501			
10	Phone:	Car Rental		\$ 3,034.28
ALLIED CAR & TRUCK RENTAL	ALLIED CAR & TRUCK RENTAL			
5910 AVE. ISLA VERDE	5910 AVE. ISLA VERDE			
Carolina PR 00979	Carolina PR 00979			
11	Phone:	Municipal Pate	ent	\$ 1,517.10
MUNICIPIO DE SAN JUAN	MUNICIPIO DE SAN JUAN			
CALL BOX 70179	CALL BOX 70179			
San Juan PR 00936	San Juan PR 00936			
12	Phone:	Antenna Renta.	1	D \$ 1,000.00
AW COMMUNICATION, INC.	AW COMMUNICATION, INC.			
P.O. BOX 1330	P.O. BOX 1330			
Fajardo PR 00738-1330	Fajardo PR 00738-1330			
13	Phone:	Municipal Pat	ent	\$ 784.77
 MUNICIPIO DE CAGUAS	MUNICIPIO DE CAGUAS			
APARTADO 907	APARTADO 907			
Caguas PR 00726	Caguas PR 00726			

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Name of Creditor and Complete Mailing Address Including Zip Code 14 MUNICIPIO DE SAN SEBASTIAN P.O. BOX 1603 San Sebastian PR 00685	Name, Telephone Number and Complete Mailing Address, Including Zip Code, of Employee, Agent, or Department of Creditor Familiar with Claim Who May Be Contacted Phone: MUNICIPIO DE SAN SEBASTIAN P.O. BOX 1603 San Sebastian PR 00685	Nature of Claim (Trade Debt, Bank Loan, Government Contract, etc.) Municipal Pate	Indicate if Claim is Contingent, Unliquidated, Disputed, or Subject to Setoff	Amount of Claim (If Secured Also State Value of Security) \$ 536.14
15 MUNICIPIO DE PONCE P.O. BOX 1709 Ponce PR 00733-1709	Phone: <i>MUNICIPIO DE PONCE</i> <i>DEPTO. DE FINANZAS</i> <i>P.O. BOX 1709</i> <i>Ponce PR 00733-1709</i>	Municipal Pate	ent	\$ 436.64
16 MUNICIPIO DE BAYAMON APARTADO 1588 BAYAMON PR 00960-1588	Phone: <i>MUNICIPIO DE BAYAMON</i> <i>DEPT. DE FINANZAS</i> <i>APARTADO 1588</i> <i>BAYAMON PR 00960-1588</i>	Municipal Pate	ent	\$ 410.86
17 MUNICIPIO DE CATANO P.O. BOX 428 CATANO PR 00963-0428	Phone: MUNICIPIO DE CATANO P.O. BOX 428 CATANO PR 00963-0428	Municipal Pate	ent	\$ 294.07
18 MUNICIPIO DE MOROVIS P.O. BOX 655 Morovis PR 00687-0655	Phone: <i>MUNICIPIO DE MOROVIS</i> <i>DEPTO. DE FINANZAS</i> <i>P.O. BOX 655</i> <i>Morovis PR 00687-0655</i>	Municipal Pate	ent	\$ 163.96

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION

I, <u>LUIS J. CRESPO</u>, <u>General Manager</u> of the <u>Corporation</u> 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: 7/10/2014

Signature /s/ LUIS J. CRESPO

Name: *LUIS J. CRESPO* Title: *General Manager*

Case:14-05656-11 Doc#:1 Filed:07/10/14 Entered:07/10/14 12:22:33 Desc: Main Document Page 11 of 13 UNITED STATES BANKRUPTCY COURT DISTRICT OF PUERTO RICO

In re OMEGA SERVICES, CORP.,

Case No. Chapter 11

/ Debtor

Attorney for Debtor: ALEXIS FUENTES-HERNANDEZ

COVER SHEET FOR LIST OF CREDITORS

I hereby certify under penalty of perjury that the attached list of creditors, which consists of <u>2</u> pages,

is true, correct and complete to the best of my knowledge.

Date: 7/10/2014

/s/ LUIS J. CRESPO

Debtor

/s/ ALEXIS FUENTES-HERNANDEZ ALEXIS FUENTES-HERNANDEZ Attorney for the debtor(s) P.O.BOX 9022726 SAN JUAN, PR 00902-2726

P.O. BOX 1198 SAINT JUST STATION Saint Just, PR 00978-1198

ALEXIS FUENTES-HERNANDEZ P.O.BOX 9022726 SAN JUAN, PR 00902-2726

ALLIED CAR & TRUCK RENTAL 5910 AVE. ISLA VERDE Carolina, PR 00979

AW COMMUNICATION, INC. P.O. BOX 1330 Fajardo, PR 00738-1330

CARIBBEAN FORENSIC & TECH COLLEGE P.O. BOX 190793 San Juan, PR 00910-0793

DEPARTMENT OF LABOR OF PR P.O. BOX 1020 SAN JUAN, PR 00919-1020

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