

United States Bankruptcy Court District of Puerto Rico		Voluntary Petition																				
Name of Debtor (if individual, enter Last, First, Middle): <b>MAYZ CORP.</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>ONE, TWO FOR YOU</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) /Complete EIN (if more than one, state all): <b>66-0688025</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all):																				
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>MONTE REAL PLAZA LOCAL 3 CARR. 3 KM 14.7 CAROLINA, PR</b>		Street Address of Joint Debtor (No. & Street, City, State & Zip Code):																				
ZIPCODE <b>00987</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 20000 PMB 367 CANOVANAS, PR</b>		Mailing Address of Joint Debtor (if different from street address):																				
ZIPCODE <b>00729</b>		ZIPCODE																				
Location of Principal Assets of Business Debtor (if different from street address above): <b>MONTE REAL PLAZA LOCAL 3, CARR. 3 KM 14.7, CAROLINA, PR</b>		ZIPCODE <b>00987</b>																				
<p style="text-align: center;"><b>Type of Debtor</b> (Form of Organization) (Check <b>one</b> box.)</p> <p><input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i></p> <p><input checked="" type="checkbox"/> Corporation (includes LLC and LLP)</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)</p> <hr/> <p style="text-align: center;"><b>Chapter 15 Debtor</b></p> <p>Country of debtor's center of main interests:</p> <hr/> <p>Each country in which a foreign proceeding by, regarding, or against debtor is pending:</p>	<p style="text-align: center;"><b>Nature of Business</b> (Check <b>one</b> box.)</p> <p><input type="checkbox"/> Health Care Business</p> <p><input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B)</p> <p><input type="checkbox"/> Railroad</p> <p><input type="checkbox"/> Stockbroker</p> <p><input type="checkbox"/> Commodity Broker</p> <p><input type="checkbox"/> Clearing Bank</p> <p><input checked="" type="checkbox"/> Other</p> <hr/> <p style="text-align: center;"><b>Tax-Exempt Entity</b> (Check box, if applicable.)</p> <p><input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).</p>	<p style="text-align: center;"><b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check <b>one</b> box.)</p> <p><input type="checkbox"/> Chapter 7</p> <p><input type="checkbox"/> Chapter 9</p> <p><input checked="" type="checkbox"/> Chapter 11</p> <p><input type="checkbox"/> Chapter 12</p> <p><input type="checkbox"/> Chapter 13</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding</p> <hr/> <p style="text-align: center;"><b>Nature of Debts</b> (Check <b>one</b> box.)</p> <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."</p> <p><input checked="" type="checkbox"/> Debts are primarily business debts.</p>																				
<p style="text-align: center;"><b>Filing Fee</b> (Check one box)</p> <p><input checked="" type="checkbox"/> Full Filing Fee attached</p> <p><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.</p> <p><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>	<p style="text-align: center;"><b>Chapter 11 Debtors</b></p> <p><b>Check one box:</b></p> <p><input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p><input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p><b>Check if:</b></p> <p><input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter).</p> <hr/> <p><b>Check all applicable boxes:</b></p> <p><input type="checkbox"/> A plan is being filed with this petition</p> <p><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>																					
<p><b>Statistical/Administrative Information</b></p> <p><input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.</p> <p><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.</p>		THIS SPACE IS FOR COURT USE ONLY																				
<p>Estimated Number of Creditors</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>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 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"/>	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 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"/>												
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<p>Estimated Assets</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>\$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 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"/>	\$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 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"/>													
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<p>Estimated Liabilities</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>\$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 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"/>	\$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 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"/>													
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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>MAYZ CORP.</b>
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**All 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 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 delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <p style="text-align: center;"><b>X</b> _____ 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 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 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 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)).

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>MAYZ CORP.</b>
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**Signatures**

<p align="center"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>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.</p> <p><input checked="" type="checkbox"/> _____ Signature of Debtor</p> <p><input checked="" type="checkbox"/> _____ Signature of Joint Debtor</p> <p>_____ Telephone Number (If not represented by attorney)</p> <p>_____ Date</p>	<p align="center"><b>Signature of a Foreign Representative</b></p> <p>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 <b>one</b> box.)</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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.</p> <p><input checked="" type="checkbox"/> _____ Signature of Foreign Representative</p> <p>_____ Printed Name of Foreign Representative</p> <p>_____ Date</p>
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<p align="center"><b>Signature of Attorney*</b></p> <p><input checked="" type="checkbox"/> <u>/s/ RUBEN GONZALEZ MARRERO</u> Signature of Attorney for Debtor(s)</p> <p><b>RUBEN GONZALEZ MARRERO 216503</b>  <b>Ruben Gonzalez</b>  <b>SANTA JUANITA PMB 403 UU1 CALLE 39</b>  <b>BAYAMON, PR 00959-6512</b>  <b>(787) 798-8601</b>  <b>RGM@MICROJURIS.COM</b></p> <p><b>October 24, 2014</b> Date</p> <p><small>*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.</small></p>	<p align="center"><b>Signature of Non-Attorney Petition Preparer</b></p> <p>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 in that section. Official Form 19 is attached.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ 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.)</p> <p>_____ Address</p>
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<p align="center"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>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.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><input checked="" type="checkbox"/> <u>/s/ ABDALLA W. MOHAMMAD</u> Signature of Authorized Individual</p> <p><b>ABDALLA W. MOHAMMAD</b> Printed Name of Authorized Individual</p> <p><b>PRESIDENT</b> Title of Authorized Individual</p> <p><b>October 24, 2014</b> Date</p>	<p><input checked="" type="checkbox"/> _____ Signature</p> <p>_____ Date</p> <p>Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.</p> <p>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:</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>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.</i></p>
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MAYZ CORP.  
P.O. BOX 20000  
PMB 367  
CANOVANAS, PR. 00729

CERTIFICADO DE RESOLUCION CORPORATIVA  
DE  
MAYZ CORP.

YO, Siham Abed Hernández, Secretaria de Mayz Corp., una corporación debidamente organizada bajo las leyes del Estado Libre Asociado de Puerto Rico.

CERTIFICO: que lo siguiente es una copia fiel y exacta de la resolución debidamente adoptada por la Junta de Directores de esta Corporación el 20 de octubre de 2014 y la misma se encuentra en vigor y efecto:

“RESUELVASE, que se le confiere poder y autorización a Abdalla W. Mohammad, Presidente de esta Corporación a solicitar la petición oficial para que Mayz Corp., se acoja a la Ley de Quiebras bajo el Capitulo 11”.

Y PARA QUE ASI CONSTE, expido la presente certificación bajo mi firma en Bayamón, Puerto Rico, hoy 20 de octubre de 2014.

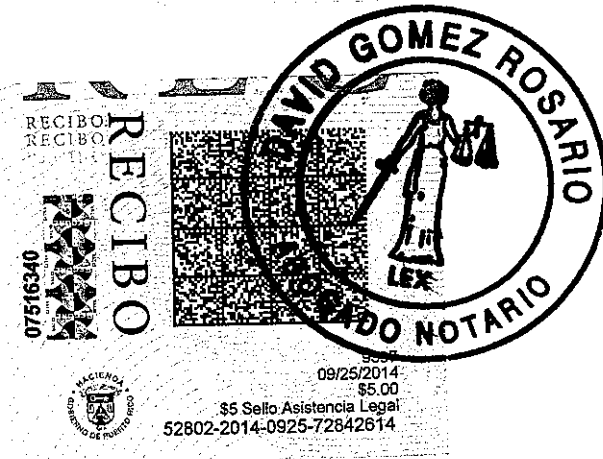


*Siham Abed Hernández*  
Siham Abed Hernández  
Secretaria

Sello Corporativo

Afidávit Núm.: 4,799

Jurado y suscrito ante mí por Siham Abed Hernández, de las circunstancias personales antes expresadas, a quien conozco personalmente. En Bayamón, Puerto Rico, a 20 de octubre de 2014.



*David Gomez Rosario*  
NOTARIO PÚBLICO

# **APPENDIX**

## **11 USC 1116(1)**



Nombre del Contribuyente  
**MAYZ CORP**

Dirección Postal  
PO BOX 2000  
PMB 367  
Canóvanas PR  
Código Postal 00957-

"Coloque el Sello de Goma (Label) aquí".

Número de Identificación Patronal  
00-0000125

Num. de Registro del Departamento de Estado  
168614

Clave Industrial 4521      Cód. Municipal 80

Número de Registro de Comerciante  
03081070011



Localización de la Industria o Negocio Principal - Número, Calle, Pueblo  
**MONTE REAL SHOPPING CENTER LOCAL #3  
CAROLINA, PR 00957**

Naturaleza de la Industria o Negocio Principal (Ej. Ferretería, Cafetería, etc.)  
**TIENDA POR DEPARTAMENTO**

Marque el encasillado correspondiente, si aplica

<input type="checkbox"/> Primera planilla	<input type="checkbox"/> Última planilla	<input type="checkbox"/> Si	<input checked="" type="checkbox"/> No
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Contratos con Organismos Gubernamentales

<input type="checkbox"/> Si	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Español	<input type="checkbox"/> Inglés
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Número de Teléfono - Extensión  
**(787) 776-1212**

Fecha de Incorporación  
Día **3** / Mes **1** / Año **2007**

Lugar de Incorporación  
**SAN JUAN, PR**

Correo Electrónico de Persona Contacto  
**MAYZCORP@YAHOO.COM**

Número de Recibo: \_\_\_\_\_  
Importa: \_\_\_\_\_

Tipo de Entidad

Indique si es miembro de un grupo de entidades relacionadas

<input type="checkbox"/> Si	<input checked="" type="checkbox"/> No
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Número de grupo

Parte I	1. Ingreso neto (o pérdida) de operaciones (De la Parte V, línea 50)	(1)	4,506	00
	2. Menos: Deducción por pérdida neta en las operaciones del año anterior (Someta detalle)	(2)		00
	3. Ingreso neto (o pérdida)	(3)	4,506	00
Parte II	4. Menos: Dividendos o beneficios recibidos de corporaciones domésticas (Véanse instrucciones)	(4)		00
	5. Ingreso neto sujeto a contribución normal (Línea 3 menos línea 4)	(5)	4,506	00
	6. Menos: Deducción para fines de la contribución adicional (Marque aquí si viene del Modelo SC 2652 <input type="checkbox"/> )	(6)	25,000	00
	7. Ingreso neto sujeto a contribución adicional (Línea 5 menos línea 6)	(7)		00
	8. Contribución normal (Multiplique la línea 5 por: <input checked="" type="checkbox"/> 20% <input type="checkbox"/> 15% <input type="checkbox"/> 10% (Marque aquí si utilizó el Anejo B4 Corporación) ....	(8)	901	00
	9. Contribución adicional (Véanse instrucciones) (Ingreso neto sujeto al 5% \$ _____)	(9)		00
	10. Contribución Total (Sume líneas 8 y 9)	(10)	901	00
	11. Contribución Alternativa - Ganancias de Capital y Tasas Preferenciales (Anejo D Corporación, Parte V, línea 40)	(11)		00
	12. Contribución Determinada (Línea 10 o 11, la que sea menor, siempre que la línea 11 sea mayor de cero)	(12)	901	00
	13. Recobro de crédito reclamado en exceso (Anejo B Corporación, Parte I, línea 3)	(13)		00
14. Créditos contributivos (Anejo B Corporación, Parte II, línea 26)	(14)		00	
15. Responsabilidad contributiva antes de contribución alternativa mínima (Suma de las líneas 12 y 13 menos línea 14)	(15)	901	00	
16. Contribución alternativa mínima (Anejo A Corporación, Parte VII, línea 52)	(16)		00	
17. Contribución sobre monto equivalente a dividendo o distribución de beneficios (Branch Profits Tax Form AS 2879, línea 11)	(17)		00	
18. Contribución sobre ingresos a tasas preferenciales (Anejo D Corporación, Parte VI, línea 43)	(18)		00	
19. Contribución adicional sobre ingreso bruto en caso de negocio financiero (Véanse instrucciones)	(19)		00	
20. Responsabilidad Contributiva Total (Sume líneas 15 a la 19)	(20)	901	00	
21. Menos: Otros Pagos y Retenciones (Anejo B Corporación, Parte III, línea 11)	(21)		00	
22. Crédito por el pago de derechos adicionales a los automóviles de lujo bajo la Ley 42-2005 (Véanse instrucciones)	(22)		00	
23. Crédito contributivo por oportunidad de empleo a Héroes y/o Heridos de las Fuerzas Armadas (Someta Anejo B4 Corporación)	(23)		00	
24. Balance de contribución a pagar (Si la línea 20 es mayor que la suma de las líneas 21 a la 23, anote la diferencia aquí, de lo contrario, en la línea 26)				
a) Contribución	(24a)	901	00	
b) Intereses	(24b)	00		
c) Recargos	(24c)	00		
d) Total (Sume líneas 24(a) a la 24(c))	(24d)	901	00	
25. Adición a la Contribución por Falta de Pago de la Contribución Estimada (Anejo T Corporación, Parte II, línea 21)	(25)		00	
26. Exceso de contribución pagada o retenida (Véanse instrucciones)	(26)		00	
27. Cantidad pagada con esta planilla	(27)	901	00	
28. Contribución pagada en exceso (Sume líneas 20 y 25, menos líneas 21 a la 23. Indique la distribución de la línea 26 en línea A, B, C o D):				
A. Acreditar a la contribución estimada año 2014	(28A)		00	
B. Aportación al Fondo Especial para el Estuario de la Bahía de San Juan	(28B)		00	
C. Aportación al Fondo Especial para la Universidad de Puerto Rico	(28C)		00	
D. A reintegrar	(28D)		00	



Parte IV

4. Jornales directos	(4)	00	
5. Costos indirectos (Parte VI)	(5)	41,627	00
6. Total costo bienes disponibles para la venta (Suma líneas 4 a 5)	(6)	236,730	00
7. Menos: Inventario al finalizar el año			
(a) Materiales	(7a)	00	
(b) Artículos en proceso	(7b)	00	
(c) Artículos terminados o mercadería	(7c)	23,527	00
8. Total de costos de ventas o costos directos de producción (Línea 6 menos línea 7)	(8)	236,203	00
9. Ganancia bruta en venta o producción (Línea 1 menos línea 8)	(9)	288,693	00
10. Ganancia neta de capital (Anejo D Corporación, Parte IV, línea 23)	(10)	00	
11. Ganancia neta (o pérdida) en la venta de propiedad que no sea activo de capital (Anejo D Corporación, Parte VII, línea 44)	(11)	00	
12. Renta	(12)	00	
13. Intereses	(13)	00	
14. Ingreso por servicio o comisiones	(14)	00	
15. Dividendos de corporaciones: (a) Domésticas (b) Extranjeras	(15)	00	
16. Participación distribuible en el ingreso neto de sociedades y sociedades especiales (Anejo R Corporación, Parte II, línea 15)	(16)	00	
17. Beneficio tributable de agricultura (Anejo S Corporación, Parte I, línea 9)	(17)	00	
18. Fletes y pasajes	(18)	00	
19. Ingresos misceláneos	(19)	00	
20. Total de ingresos (Suma líneas 9 a la 19)	(20)	288,693	00

Parte V

		(A)	(B)
21. Compensación a oficiales (Véanse instrucciones Parte X)	(21)	00	00
22. Sueldos, comisiones y bonificaciones a empleados (Total \$ 142,906 ) (Véanse instrucciones)	(22)	00	142,906
23. Comisiones a negocios	(23)	00	00
24. Seguro social federal (FICA)	(24)	00	10,932
25. Seguro de desempleo	(25)	00	1,394
26. Primas Fondo Seguro del Estado	(26)	00	1,890
27. Seguro médico o de hospitalización	(27)	00	00
28. Seguros	(28)	00	14,736
29. Intereses (Véanse instrucciones)	(29)	00	1,148
30. Renta	(30)	00	62,571
31. Contribución sobre propiedad: (a) Mueble 2,383 (b) Inmueble	(31)	00	2,383
32. Otras contribuciones, patentes y licencias (Véanse instrucciones)	(32)	00	3,002
33. Pérdidas ocasionadas por fuego, huracán, otros siniestros o por robo	(33)	00	00
34. Gastos de automóviles (Millaje 1,801 ) (Véanse instrucciones)	(34)	00	1,081
35. Gastos de otros vehículos de motor (Véanse instrucciones)	(35)	00	00
36. Gastos de comida y entretenimiento (Total ) (Multiplique total por 50% y anote en esta línea)	(36)	00	00
37. Gastos de viajes	(37)	00	1,135
38. Servicios profesionales	(38)	00	700
39. Aportaciones a planes de pensiones u otros planes calificados (Véanse instrucciones. Someta Modelo SC 6042)	(39)	00	00
40. Depreciación y amortización (Véanse instrucciones. Someta Anejo E)	(40)	00	2,133
41. Deudas incobrables (Véanse instrucciones)	(41)	00	00
42. Donativos (Véanse instrucciones)	(42)	00	00
43. Reparaciones (Véanse instrucciones)	(43)	00	1,475
44. Regalías	(44)	00	00
45. Cargos de administración	(45)	00	00
46. Deducción a patronos que emplean personas impedidas (Véanse instrucciones)	(46)	00	00
47. Aportaciones a cuentas de aportación educativa para los beneficiarios de sus empleados (Véanse instrucciones)	(47)	00	00
48. Otras deducciones (Véanse instrucciones)	(48)	00	36,701
49. Total de deducciones (Suma líneas 21 a la 48, Columnas A y B, respectivamente)	(49)	00	284,187
50. Ingreso neto (o pérdida) de operaciones del año (Línea 20 menos línea 49, Columna B. Traslade a la Parte I, línea 1)	(50)		4,506

Parte VI

Partida	Importe	Partida	Importe
1. Jornales, sueldos y bonificaciones	(1) 00	8. Reparaciones	(8) 00
2. Seguro social federal (FICA)	(2) 00	9. Luz y agua	(9) 00
3. Seguro de desempleo	(3) 00	10. Renta	(10) 00
4. Primas Fondo Seguro del Estado	(4) 00	11. Depreciación (Someta Anejo E)	(11) 00
5. Seguro médico o de hospitalización	(5) 00	12. Otros gastos (Someta detalle)	(12) 41,620
6. Otros seguros	(6) 00	13. Total otros costos directos (Suma líneas 1 a la 12. Igual a la Parte IV, línea 5)	(13) 41,620
7. Arbitrios / Impuesto sobre Uso	(7) 00		







1. Clase de propiedad (en caso de edificaciones, indique el tipo de material utilizado en la construcción).	2. Fecha de adquisición.	3. Costo u otra base (excluya el costo del terreno). En el caso de automóviles, la base no debe exceder de \$30,000 por vehículo.	4. Depreciación reclamada en años anteriores.	5. Estimado de vida usado para computar depreciación.	6. Depreciación reclamada este año.
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(a) Depreciación Corriente

EQUIPO DE OFICINA		14,126	00	11,993	00	5	2,133	00
			00		00			00
			00		00			00
<b>Total</b>				<b>11,993</b>	<b>00</b>			<b>2,133</b>

(b) Depreciación Flexible

			00		00			00
			00		00			00
			00		00			00
<b>Total</b>					00			00

(c) Depreciación Acelerada

			00		00			00
			00		00			00
			00		00			00
<b>Total</b>					00			00

(d) Amortización (ej. Goodwill)

			00		00			00
			00		00			00
			00		00			00
<b>Total</b>					00			00

(e) Automóviles (Véanse instrucciones)

			00		00			00
			00		00			00
			00		00			00
<b>Total</b>					00			00

(f) Vehículos bajo arrendamiento financiero (Formulario 480.7D) (Cantidad de vehículos \_\_\_\_\_) (01) ..... (02)

								00
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**Nota: Complete la próxima línea sólo si está llenando el Formulario 482 (Planilla de Contribución sobre Ingresos de Individuos)**

**TOTAL:** (Sume el Total de líneas (a) a la (f) de la Columna 6. Traslade a los Anejos K, L, M y N Individuo, según aplique, o a la línea correspondiente de otras planillas) ..... (10)

Parte VII

5. Otros activos corrientes	(5)					53,876	00
6. Obligaciones a cobrar	(6)		34,614	00			
7. Inversiones	(7)		14,126	00		14,126	00
8. Activos depreciables	(8)						
9. Menos: Reserva para depreciación	(9)		11,993	00	2,133	00	
10. Terrenos	(10)						
11. Otros activos a largo plazo	(11)				11,268	00	52,381
12. Total de Activos	(12)				74,493	00	132,187
<b>Pasivos y Capital</b>							
<b>Pasivos</b>							
13. Cuentas a pagar	(13)					61,091	00
14. Gastos incurridos y no pagados	(14)					3,525	00
15. Otros pasivos corrientes	(15)						00
16. Obligaciones a pagar a largo plazo	(16)				10,361	00	
17. Otras obligaciones a largo plazo	(17)				166	00	
18. Total de Pasivos	(18)				10,527	00	64,616
<b>Capital</b>							
19. Capital en acciones							
(a) Acciones preferidas	(19a)						00
(b) Acciones comunes	(19b)				1,200	00	
20. Sobrante de capital	(20)						00
21. Ganancias retenidas	(21)				62,766	00	66,371
22. Reserva	(22)						00
23. Total de Capital	(23)				63,966	00	67,571
24. Total Pasivos y Capital	(24)				74,493	00	132,187

**Reconciliación del Ingreso Neto (o Pérdida) según Libros con el Ingreso Neto Tributable (o Pérdida) según Planilla**

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Parte VIII

1. Ingreso neto (o pérdida) según libros	(1)	3,605	00	7. Ingreso registrado en los libros este año no incluido en esta planilla (Detalle, use anejo si es necesario)			
2. Contribución sobre ingresos según libros	(2)	901	00	(a) Intereses exentos			
3. Exceso de pérdidas de capital sobre ganancias de capital	(3)		00	(b)			
4. Ingreso tributable no registrado en los libros este año (Detalle, use anejo si es necesario)				(c)			
(a)				(d)			
(b)				Total	(7)		00
(c)				8. Deducciones en esta planilla no llevadas contra el ingreso en los libros este año (Detalle, use anejo si es necesario)			
Total	(4)		00	(a) Depreciación			
5. Gastos registrados en los libros este año no reclamados en esta planilla (Detalle, use anejo si es necesario)				(b)			
(a) Comida y entretenimiento (porción no reclamada)				(c)			
(b) Depreciación				(d)			
(c) Vehículos de motor (en exceso del límite)				Total	(8)		00
(d) Embarcaciones, aeronaves y propiedad localizada fuera de P. R.				9. Total (Suma líneas 7 y 8)	(9)		00
(e) Gastos incurridos o pagados a accionistas, personas o entidades relacionadas				10. Ingreso neto tributable (o pérdida) según planilla (Línea 6 menos línea 9)	(10)	4,506	00
(f)							
Total	(5)		00				
6. Total	(6)	4,506	00				

**Análisis del Sobrante según Libros**

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Parte IX

1. Balance al comenzar el año	(1)	62,766	00	5. Distribuciones:	(5a)		00
2. Ingreso neto según libros	(2)	3,605	00	(b) Propiedad	(5b)		00
3. Otros aumentos (Detalle, use anejo si es necesario)	(3)		00	(c) Acciones	(5c)		00
4. Total (Suma líneas 1, 2 y 3)	(4)	66,371	00	6. Otras rebajas (Use anejo si es necesario)	(6)		00
				7. Total (Suma líneas 5 y 6)	(7)		00
				8. Balance al finalizar el año (Línea 4 menos línea 7)	(8)	66,371	00



Total de compensación a oficiales (Traslade a la Parte V, línea 21)

**Cuestionario 42**


Parte XI

1. Si es una corporación extranjera, indique si la industria o negocio operó como sucursal
2. Si es una sucursal, indique el por ciento que representa el ingreso de fuentes de Puerto Rico del total de ingreso de la corporación: %
3. ¿Mantuvo la corporación durante este año parte de sus récords en un sistema computadorizado?
4. Los libros de la corporación están a cargo de:  
 Nombre: MAYZ CORP  
 Dirección: PO BOX 20000  
PMB 367  
 Correo electrónico (E-mail): MAYZCORP@YAHOO.COM  
 Teléfono: (787) 776-1212
5. Indique el método de contabilidad utilizado en los libros para propósitos contributivos:  
 Recibido y Pagado  Acumulación  
 Otro (especifique):
6. ¿Rindió la corporación los siguientes documentos?  
 (a) Declaración Informativa (Formularios 480.5, 480.6A, 480.6B)   
 (b) Comprobante de Retención (Formulario 499R-2/W-2PR)
7. Si el ingreso bruto de la entidad o del grupo controlado excede de \$3,000,000, ¿Someteó estados financieros auditados por un CPA con licencia de Puerto Rico?
8. Número de empleados durante el año: \_\_\_\_\_
9. ¿Reclamó la corporación gastos relacionados con la titularidad, uso, mantenimiento y depreciación de:  
 (a) Automóviles?   
 (b) Embarcaciones?   
 (1) ¿Derivó más del 80% de la totalidad de sus ingresos de actividades relacionadas exclusivamente con la pesca o transportación de pasajeros o de carga o arrendamiento?

- |  | SI | NO                                  |       | SI | NO                                  |
|--|----|-------------------------------------|-------|----|-------------------------------------|
| (c) Aeronaves?   |    | <input checked="" type="checkbox"/> | (9c)  |    | <input checked="" type="checkbox"/> |
| (1) ¿Derivó más del 80% de la totalidad de los ingresos de actividades relacionadas exclusivamente con la transportación de pasajeros o de carga o arrendamiento?                                  |    | <input checked="" type="checkbox"/> | (9c1) |    | <input checked="" type="checkbox"/> |
| (d) Propiedad residencial fuera de Puerto Rico?  |    | <input checked="" type="checkbox"/> | (9d)  |    | <input checked="" type="checkbox"/> |
| (1) ¿Derivó más del 80% de la totalidad de sus ingresos de actividades relacionadas exclusivamente con el alquiler de propiedades a personas no relacionadas?                                      |    | <input checked="" type="checkbox"/> | (9d1) |    | <input checked="" type="checkbox"/> |
| 10. ¿Reclamó la corporación gastos relacionados con:<br>(a) Alojamiento? (excepto empleados del negocio)<br>(b) Empleados que asistieron a convenciones fuera de Puerto Rico o los Estados Unidos? |    | <input checked="" type="checkbox"/> | (10a) |    | <input checked="" type="checkbox"/> |
|  |    | <input checked="" type="checkbox"/> | (10b) |    | <input checked="" type="checkbox"/> |
| 11. ¿Distribuyó la corporación, durante el año contributivo, dividendos que no fueran en acciones o en liquidación en exceso de la ganancia corriente y acumulada?                                 |    | <input checked="" type="checkbox"/> | (11)  |    | <input checked="" type="checkbox"/> |
| 12. ¿Es la corporación socio de una sociedad especial? (Si es más de una, someta detalle)<br>Nombre de la Sociedad Especial _____<br>Número de identificación patronal _____                       |    | <input checked="" type="checkbox"/> | (12)  |    | <input checked="" type="checkbox"/> |
| 13. ¿Recibió ingresos exentos? (Somete Anejo IE Corporación)   |    | <input checked="" type="checkbox"/> | (13)  |    | <input checked="" type="checkbox"/> |
| 14. Anote la cantidad correspondiente de donativos a municipios de la cantidad incluida en la Parte V, línea 42: _____   |    | <input checked="" type="checkbox"/> | (14)  |    | <input checked="" type="checkbox"/> |
| 15. Indique si pagó primas a aseguradores no autorizados   |    | <input checked="" type="checkbox"/> | (15)  |    | <input checked="" type="checkbox"/> |
| 16. Número de patrono otorgado por el Departamento del Trabajo y Recursos Humanos: _____   |    | <input checked="" type="checkbox"/> |       |    | <input checked="" type="checkbox"/> |
| 17. Número de accionistas: _____   |    | <input checked="" type="checkbox"/> |       |    | <input checked="" type="checkbox"/> |

**JURAMENTO**

Nosotros, los suscribientes, presidente (o vicepresidente u otro oficial principal) y tesorero (o tesorero auxiliar), o agente de la corporación a nombre de la cual se hace esta planilla de contribución sobre ingresos, cada uno por sí, bajo el más solemne juramento y so pena de perjurio, declaramos que hemos examinado la misma (incluyendo anejos y estados que la acompañan), y que según nuestro mejor conocimiento y creencia es una planilla exacta, correcta y completa, hecha de buena fe, de acuerdo con el Código de Rentas Internas de 2011, según enmendado, y sus Reglamentos.

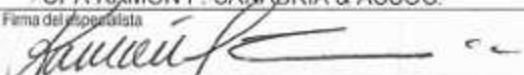
  
 Firma del presidente o vicepresidente

\_\_\_\_\_  
 Firma del tesorero o tesorero auxiliar

**ABALLAH MOHAMMAD**  
 Agente

**PARA USO DEL ESPECIALISTA SOLAMENTE**

Declaro bajo penalidad de perjurio que he examinado esta planilla (incluyendo los anejos y estados adjuntos), y a mi mejor conocimiento y creencia, los datos en la misma son ciertos, correctos y constituyen en conjunto una planilla exacta y completa. La declaración de la persona que prepara esta planilla es con relación a la información recibida y ésta puede ser verificada.

Nombre del especialista (Letra de molde)	Núm. de registro	Fecha	Marque aquí si es especialista por cuenta propia
<b>4P</b> RAMON J. SANABRIA	2   7   2   4		<input checked="" type="checkbox"/>
Nombre de la firma	Dirección	Código postal	
CPA RAMON F. SANABRIA & ASSOC.	AVE. PINO H-28 VILLA TURABO, CAGUAS, PR	00725	
Firma del especialista			
			

**NOTA AL CONTRIBUYENTE**  
 Indique si hizo pagos por la preparación de su planilla:  Si  No. Si contestó "Si", exija la firma y el número de registro del Especialista.

Período de Conservación: Diez (10) años



Document Page 13 of 21
United States Bankruptcy Court
District of Puerto Rico

IN RE:

Case No. 2014-XXXX

MAYZ CORP.

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).

Table with 5 columns: (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)

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: October 24, 2014

Signature: /s/ ABDALLA W. MOHAMMAD

ABDALLA W. MOHAMMAD, PRESIDENT

(Print Name and Title)

IN RE:

Case No. 2014-XXXX

MAYZ CORP.

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 ..... \$ 180.00/hr

Prior to the filing of this statement I have received ..... \$ 2,000.00

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

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

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

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

I have agreed to share the above-disclosed compensation with a 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]

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

**Adversary proceedings require a new agreement with the attorneys. Adversary proceedings of any nature, post confirmation matters and motions for relief from stay after the confirmation of the plan are excluded from the above stated fee and shall be billed at the above stated hourly rates and paid upon approval of proper application to the Court.**

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.

October 24, 2014

Date

/s/ RUBEN GONZALEZ MARRERO

RUBEN GONZALEZ MARRERO 216503  
Ruben Gonzalez  
SANTA JUANITA PMB 403 UU1 CALLE 39  
BAYAMON, PR 00959-6512  
(787) 798-8601  
RGM@MICROJURIS.COM

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b)  
OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).



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IN RE:

Case No. 2014-XXXX

MAYZ CORP.

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: October 24, 2014

Signature: /s/ ABDALLA W. MOHAMMAD

**ABDALLA W. MOHAMMAD, PRESIDENT**

Debtor

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

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

Joint Debtor, if any

MAYZ CORP.  
PO BOX 20000  
PMB 367  
CANOVANAS, PR 00729

AUTORIDAD DE ENERGIA ELECTRICA  
PO BOX 363508  
SAN JUAN, PR 00936-3508

DAINTY HOME  
251 2ND FLOOR FIFTH AVENUE  
NEW YORK, NY 10016

Ruben Gonzalez  
SANTA JUANITA PMB 403 UU1 CALLE 39  
BAYAMON, PR 00959-6512

BANCO POPULAR DE PR  
PO BOX 362708  
SAN JUAN, PR 00936-2708

DEPARTAMENTO DE HACIENDA  
PO BOX 9024140  
SAN JUAN, PR 00902-4140

A&H IMPORTS, INC.  
315 S. BEVERLY DR. SUITE 301  
BEVERLY HILLS, CA 90212

BETTER HOME PLASTICS CORP.  
439 COMMERCIAL AVENUE  
PALISADES PARK, NJ 07650

DERBY HOME TEXTILES  
ZONA LIBRE DE COLON ED. DERBY  
AVE. ROOSEVELT ENTRE C/15 Y 16  
PANAMA, 0302-00118

ADORABLE F&R CORP  
PO BOX 218  
TOA BAJA, PR 00951-0218

CAPRI, SE  
PO BOX 36421  
SAN JUAN, PR 00936-4021

DERBY, SA  
ZONA LIBRE DE COLON ED. DERBY  
AVE. ROOSEVELT ENTRE C/15 Y 16  
PANAMA, 030200118

AL-DAN TRADING, INC.  
20600 NW 47TH AVENUE  
MIAMI, FL 33055

CASTLE TRADING LTD  
AKARA BLDG. 24 DE CASTRO ST.  
WICKHAMS CAY, ROAD TOWN  
TORTOLA, VI 00000

DJH INC  
PO BOX 4811  
5390 NW 161 STREET  
MIAMI GARDENS, FL 33014

ALMACENES KIKUET  
PO BOX 1673  
CANOVANAS, PR 00729-1673

CHD HOME TEXTILES LLC  
255 FIFTH AVENUE FLOOR 5  
NEW YORK, NY 10016

DWECK ASSOCIATES INC  
230 5TH AVENUE SUITE 601  
NEW YORK, NY 10001

ALMACENES LOPEZ  
HC1 BOX 4986  
NAGUABO, PR 00718-9723

COD NOVELTIES  
580 CALLE NAPOLES MARG 65 DE  
INFANTERIA  
SAN JUAN, PR 00924

DYNAMITE DECORATORS  
284 5TH AVENUE  
NEW YORK, NY 10016

AMERICAN LINEN  
45B FERNWOOD AVE.  
EDISON, NJ 08837

COMPASS INDUSTRIES INC  
104 WEST 29TH STREET SUITE 1201  
NEW YORK, NY 10001

ECI CUSTOMS  
PO BOX 50154  
TOA BAJA, PR 00950-0154

ARTISITIC LINEN INC  
307 FIFTH AVENUE SUITE 1500  
NEW YORK, NY 10016

CREATIVE DISTRIBUTORS, LTD  
PO BOX 1777  
BELICE CITY  
BELICE, PANAMA, 00000-0000

ESTEX DYNAMITE DECORATORS  
1100 LINWOOD STREET  
NEW YORK, NY 11208

AUTO ACCESORIOS DE PR, INC  
1473 EL5 AVE. PONCE DE LEON  
SAN JUAN, PR 00926

CWC INVENTORIES INC  
2644 METRO BLVD.  
ST. LOUIS, MO 63043

FELICIA DISTRIBUTION  
PO BOX 9023937  
SAN JUAN, PR 00902-3937

FIZZY BABY LLC  
27 8TH STREET  
PASSAIC, NJ 07055

KASHI ENTERPRISES  
230 FIFTH AVENUE 504  
NEW YORK, NY 10001

LUXURY HOME TEXTILES  
230 FIFTH AVENUE SUITE 1606  
NEW YORK, NY 10001

GENERAL WHOLESALERS &  
DISTRIBUTORS, INC  
PO BOX 1739  
TRUJILLO ALTO, PR 00977-1739

KENNEDY CENTER CORP  
PO BOX 0302-00737  
PANAMA,

MAR COMPANY DIST.  
8400 NW 17TH STREET  
DORAL, FL 33126

GRUPO BLUE MARKIS CLR  
PO BOX 364021  
SAN JUAN, PR 00936-4021

KENNEDY INTERNATIONAL, INC  
25 STULTS ROAD  
DAYTON, NJ 08810

MAX CHEMICAL, INC.  
P.O. BOX 363841  
SAN JUAN, PR 00936-3841

H&M HOME DESIGN  
5603 FOSTER AVE.  
BROOKLYN, NY 11234

KOLE IMPORTS  
24600 S. MAIN STREET  
CARSON, CA 90745

MAY'S ZONA LIBRE, S.A.  
APARTADO POSTAL 0302-00493  
ZONA LIBRE DE COLON  
PANAMA,

HOME EXPRESSIONS  
195 RARITAN CENTER PARKWAY  
EDISON, NJ 08837

LAMPARAMA INTERNATIONAL, S.A.  
ZONA LIBRE DE COLON  
APARTADO 0302-00888  
PANAMA,

METROFASHION, S.A.  
APARTADO POSTAL 0302  
00829 Z.L. ZONA LIBRE DE COLON  
PANAMA,

HOME SOURCE INDUSTRIES  
17 EMPIRE BLVD.  
SOUTH HACKENSACK, NJ 07606

LEL CARIBE  
PO BOX 824647  
PHILADELPHIA, PA 19182-4647

MIGUEL ANGEL DELGADO  
PO BOX 140934  
ARECIBO, PR 00614

HOUSEWARES INTERNATIONAL, INC  
6015 RANDOLPH STREET  
CITY OF COMMERCE, CA 90040

LEL CARIBE LLC  
GENERAL OFFICE  
PO BOX 9020737  
SAN JUAN, PR 00902-0737

MIRA DIST. INC.  
LOMAS DE CAROLINA  
G20 MONTE ALEGRE  
CAROLINA, PR 00987

IT'S IN THE BAG, LLC  
231 46TH STREET  
BROOKLYN, NY 11220

LINCOLN INTERNATIONAL PRODUCTS  
4601 S SOTO#A  
VERNON, CA 90058

MIZRATEX  
PO BOX 1736  
COLON FREE ZONE REP. DE PANAMA  
PANAMA,

J. BAKOL INC.  
PO BOX 230164  
BROOKLYN, NY 11223

LINEN UNIVERSE, INC  
5150 NW 165TH STREET  
MIAMI, FL 33014

MYLETEx/FIZZY SALES  
27 8TH STREET  
PASSAIC, NJ 07055

JR QUALITY PRODUCTS INC  
HC5 BOX 18064  
ARECIBO, PR 00612

LM IMPORT & EXPORT, INC  
4805 NW 165TH STREET  
MIAMI, FL 33014

NEW PORT SALES, INC  
PO BOX 11594  
SAN JUAN, PR 00922-1594

NORTH & SOUTH WHOLESALERS  
20600 NW 47TH AVENUE  
MIAMI GARDENS, FL 33055

RODEO DEPOT  
CALLE D LOCAL D2  
ZONA LIBRE DE COLON  
PANAMA, 0302-00253

VIVATEX HOME COLLECTIONS INC  
230 5TH AVENUE  
NEW YORK, NY 10001

OMEGA & DELTA CO. INC.  
PO BOX 1831  
CAROLINA, PR 00984

RODEO IMPORT  
CALLE C EDIFICIO RODEO  
PANAMA, 0302-00253

VOLUME DISTRIBUTORS  
4199 BANDINI BLVD.  
VERNON, CA 90058

PEMAR DISTRIBUTORS  
P.O. BOX 514  
SABANA SECA, PR 00952-0514

ROYAL DELUXE ACCESORIES LLC  
2563 BRUNSWICK AVE. BUILDING 02  
LINDEN, NJ 07036

WHOLESALE MERCHANDISERS, LLC  
6250 S. BOYLE AVE.  
VERNON, CA 90058

PRICE POWER INT'L, INC  
4274 S. BOYLE AVE & LEONIS BLV  
VERNON, CA 90058

ROYAL TRADING INC.  
PO BOX 32348  
CHICAGO, IL 60632

PRIME GROCERIES INC  
PO BOX 364014  
SAN JUAN, PR 00936

RUBIO IMPORTS, INC  
PO BOX 3933  
AGUADILLA, PR 00605-3933

PRO MEX CLEANERS GROUP, INC  
PO BOX 1407  
CAROLINA, PR 00984-1407

SEA FREIGHT LOGISTICS INC  
PO BOX 4003  
CAROLINA, PR 00984

R&H DISTRIBUTORS CORP  
BAYAMON GARDENS STATION  
PO BOX 3511  
BAYAMON, PR 00958

SWATOW PUERTO RICO CORPORATION  
PO BOX 191895  
SAN JUAN, PR 00919-1895

REGENT PRODUCTS CORP  
8999 PALMER STREET  
RIVER GROOVE, IL 60171-1926

THE DEPARTMENT OF THE TREASURY  
PO BOX 409101  
OGDEN, UT 84409

RENEWAL CONSUMER PRODUCTS, INC  
PO BOX 675  
GUAYNABO, PR 00970-3369

UNIVERSAL FINANCE INC  
PO BOX 70380  
SAN JUAN, PR 00936-8380

RETAIL MARKETING DISTRIBUTOR CORP  
PO BOX 675  
TRUJILLO ALTO, PR 00977-0675

VICTORIA CLASSICS  
PO BOX 347123  
PITTSBURGH, PA 15251-7123



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IN RE:

Case No. 2014-XXXX

MAYZ CORP.

Chapter 11

Debtor(s)

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer
Address:

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.)

X
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

MAYZ CORP.
Printed Name(s) of Debtor(s)

X /s/ ABDALLA W. MOHAMMAD
Signature of Debtor

10/24/2014
Date

Case No. (if known) 2014-XXXX

X
Signature of Joint Debtor (if any)

Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.