

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF PUERTO RICO

Case number (if known)

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

12/15

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name GENERAL MOTRIZ, INC.

2. All other names debtor used in the last 8 years DBA GM AUTO PARTS
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 66-0420713

4. Debtor's address Principal place of business Mailing address, if different from principal place of business
CARR 174 #A5 URB. AGUSTIN STAHL BAYAMON, PR 00956
PMB 249 1353 AVE. LUIS VIGOREAUX GUAYNABO, PR 00966-2715
Number, Street, City, State & ZIP Code P.O. Box, Number, Street, City, State & ZIP Code
Bayamon Location of principal assets, if different from principal place of business
County CARR 174 A5 URB. AGUSTIN STAHL BAYAMON, PR 00956
Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor
[] Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
[] Partnership
[] Other. Specify:

7. Describe debtor's business A. *Check one:*

Health Care Business (as defined in 11 U.S.C. § 101(27A))

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

Railroad (as defined in 11 U.S.C. § 101(44))

Stockbroker (as defined in 11 U.S.C. § 101(53AB))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

Clearing Bank (as defined in 11 U.S.C. § 781(3))

None of the above

B. *Check all that apply*

Tax-exempt entity (as described in 26 U.S.C. §501)

Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)

Investment advisor (as defined in 15 U.S.C. §80a-3)

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.naics.com/search/>.

8. Under which chapter of the Bankruptcy Code is the Debtor filing? *Check one:*

Chapter 7

Chapter 9

Chapter 11. *Check all that apply:*

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 after that).

The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operation, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

A plan is being filed with this petition.

Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).

The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.

The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years? No. Yes.

If more than 2 cases, attach a separate list.

| | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? No. Yes.

List all cases. If more than 1, attach a separate list

| | |
|----------------|--|
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ Case number, if known _____ |

11. **Why is the case filed in this district?** *Check all that apply:*
- Debtor has had its domicile, 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.
 - A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. **Does the debtor own or have possession of any real property or personal property that needs immediate attention?** No
- Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** *(Check all that apply.)*
- It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
 - It needs to be physically secured or protected from the weather.
 - It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
 - Other _____
- Where is the property?** _____
Number, Street, City, State & ZIP Code
- Is the property insured?**
- No
 - Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. **Debtor's estimation of available funds** *Check one:*
- Funds will be available for distribution to unsecured creditors.
 - After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. **Estimated number of creditors**
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. **Estimated Assets**
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. **Estimated liabilities**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input checked="" type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signature

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

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

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 21, 2016
MM / DD / YYYY

X /s/ CARLOS MARCE FAJARDO
Signature of authorized representative of debtor

Title PRESIDENT

CARLOS MARCE FAJARDO
Printed name

18. Signature of attorney

X /s/ VICTOR GRATACOS-DIAZ
Signature of attorney for debtor

Date March 21, 2016
MM / DD / YYYY

VICTOR GRATACOS-DIAZ
Printed name

GRATACOS LAW FIRM, P.S.C.
Firm name

PO BOX 7571
CAGUAS, PR 00726
Number, Street, City, State & ZIP Code

Contact phone (787) 746-4772 Email address bankruptcy@gratacoslaw.com

127906
Bar number and State

Fill in this information to identify the case:

Debtor name **GENERAL MOTRIZ, INC.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known): _____

Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders 12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, and government contracts) | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim | | |
|--|--|---|--|---|---|-----------------|
| | | | | If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| AUTO PIEZAS DEL CARIBE 167 STATE ROAD A9 MARGINAL FOREST HILLS BAYAMON, PR 00957 | | COMERCIAL DEBT | | | | \$4,600.00 |
| BENITEZ AUTO PO BOX 8789 BO. BAIROA CAGUAS, PR 00726 | | COMERCIAL DEBT | | | | \$5,695.05 |
| CABRERA PO BOX 140400 ARECIBO, PR 00614-0400 | | COMERCIAL DEBT | | | | \$9,384.92 |
| CENTRO DE RECAUDACION DE IMPUESTOS MUNIC PO BOX 195387 SAN JUAN, PR 00919-5287 | | PROPERTY TAX | | | | \$12,126.43 |
| DEPARTMENT OF TREASURY BANKRUPTCY SECTION PO BOX 9024140 OFFICE 424-B SAN JUAN, PR 00902-4140 | | ALCOHOL SALES | Disputed | | | \$5,000.00 |
| DEPARTMENT OF TREASURY BANKRUPTCY SECTION PO BOX 9024140 OFFICE 424-B SAN JUAN, PR 00902-4140 | | TAX DEBT | | | | \$117,776.01 |

Debtor **GENERAL MOTRIZ, INC.**
Name _____

Case number (if known) _____

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, and government) | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|---|--|---|--|--|---|-----------------|
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| DEPARTMENT OF TREASURY BANKRUPTCY SECTION PO BOX 9024140 OFFICE 424-B SAN JUAN, PR 00902-4140 | | TAX DEBT | | | | \$16,402.28 |
| DEPARTMENT OF TREASURY BANKRUPTCY SECTION - OFFICE 424-B PO BOX 9024140 OFFICE 424-B SAN JUAN, PR 00902-4140 | | TAX DEBT | | | | \$13,023.68 |
| DEPARTMENT OF TREASURY BANKRUPTCY SECTION PO BOX 9024140 OFFICE 424-B SAN JUAN, PR 00902-4140 | | TAX DEBT | | | | \$12,776.41 |
| DIMA INTERNATIONAL AMELIA INDUSTRIAL PARK #39 CALLE FRANCES GUAYNABO, PR 00968 | | COMERCIAL DEBT | | | | \$15,568.72 |
| INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY OPERATION PO BOX 7346 PHILADELPHIA, PA 19101-7346 | | TAX DEBT | | | | \$7,389.24 |
| LOZADA AUTO TRUCK, INC. PO BOX 3158 BAYAMON, PR 00960-3158 | | COMERCIAL DEBT | | | | \$21,554.00 |
| MAXI BODY PO BOX 09211 SAN JUAN, PR 00908 | | COMERCIAL DEBT | | | | \$2,274.09 |

Debtor **GENERAL MOTRIZ, INC.**
Name

Case number (if known)

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, and government) | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim | | |
|---|--|---|--|-----------------------------------|---|-----------------|
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| MUNICIPIO DE BAYAMON PO BOX 1588 BAYAMON, PR 00960-1588 | | TAX DEBT | | | | \$35,549.49 |
| OVERSEA IMPORT PO BOX 364951 SAN JUAN, PR 00936-4951 | | COMERCIAL DEBT | | | | \$2,436.41 |
| THE PARTS HOUSE 10321 FORTUNE PARKWAY, BLDG 400 JACKSONVILLE, FL 32256 | | COMERCIAL DEBT | | | | \$23,637.00 |
| TRIPLE-S SALUD PO BOX 71548 SAN JUAN, PR 00936-8648 | | INSURANCE | | | | \$2,900.00 |
| VENTO DISTRIBUITORS PO BOX 363051 SAN JUAN, PR 00936-3051 | | COMERCIAL DEBT | | | | \$1,845.85 |
| ZORILLA COMMERCIAL CORPORATION PO BOX 362367 SAN JUAN, PR 00936 | (787) 783-9315 | COMERCIAL DEBT | | | | \$219,449.26 |
| ZORILLA REALTY CORPORATION PO BOX 362367 SAN JUAN, PR 00936-2367 | | 5 MONTH RENT | | | | \$14,700.00 |

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
District of Puerto Rico

In re GENERAL MOTRIZ, INC.

Debtor(s)

Case No.

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

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

FLAT FEE

For legal services, I have agreed to accept \$
Prior to the filing of this statement I have received \$
Balance Due \$

RETAINER

For legal services, I have agreed to accept and received a retainer of \$ 11,000.00
The undersigned shall bill against the retainer at an hourly rate of \$ 200.00
[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

2. \$ 1,717.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor Other (specify):

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

Debtor Other (specify):

5. 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.

6. 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]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

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

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

In re **GENERAL MOTRIZ, INC.**

Case No. _____

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)
(Continuation Sheet)

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.

March 21, 2016

Date

/s/ VICTOR GRATACOS-DIAZ

VICTOR GRATACOS-DIAZ 127906

Signature of Attorney

GRATACOS LAW FIRM, P.S.C.

PO BOX 7571

CAGUAS, PR 00726

(787) 746-4772 Fax: (787) 746-3633

bankruptcy@gratacoslaw.com

Name of law firm

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

In re GENERAL MOTRIZ, INC.

Debtor(s)

Case No.
Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for GENERAL MOTRIZ, INC. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

March 21, 2016

Date

/s/ VICTOR GRATACOS-DIAZ

VICTOR GRATACOS-DIAZ 127906

Signature of Attorney or Litigant
Counsel for **GENERAL MOTRIZ, INC.**

GRATACOS LAW FIRM, P.S.C.

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