### Case:16-02677-BKT11 Doc#:1 Filed:04/06/16 Entered:04/06/16 09:52:18 Desc: Main Document Page 1 of 10

		Docume	nt Page 1 of 10	
Fill	in this information to ident	tify your case:		
Un	ited States Bankruptcy Court	for the:		
DIS	STRICT OF PUERTO RICO			
Ca	se number (if known)		Chapter <b>11</b>	
				☐ Check if this an amended filing
	ficial Form 201 Oluntary Petiti	on for Non-Individu	als Filing for Ban	kruptcv 4/16
lf m	ore space is needed, attach		op of any additional pages, write the	ne debtor's name and case number (if known).
1.	Debtor's name	EMPANORTH, INC.		
2.	All other names debtor used in the last 8 years			
	Include any assumed names, trade names and doing business as names			
3.	Debtor's federal Employer Identification Number (EIN)	66-0761203		
4.	Debtor's address	Principal place of business	Mailing add business	ress, if different from principal place of
		CARR. 129 KM. 10.1 BARRIO CAMPO ALEGRE Hatillo, PR 00659	PO BOX 69 SUITE 224 Hatillo, PR	
		Number, Street, City, State & ZIP Code		imber, Street, City, State & ZIP Code
		Hatillo County	Location of place of bus	principal assets, if different from principal iiness
			Number, Stre	eet, City, State & ZIP Code
5.	Debtor's website (URL)			
6.	Type of debtor	Corneration (including Limited Liabil	ity Company (LLC) and Limited Liabi	lity Partnerchin /LLD\\
		☐ Partnership (excluding LLP)	ncy Company (LLC) and Limited Liabi	יינא ז מונויסוווף <i>(בבו ן)</i>

☐ Other. Specify:

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Debtor	EMPANORTH, INC.	Document	Page 2 of 10 Case number (if known)	2000.
	Name			

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(53A))  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. §80b-2(a)(11))						
		American Industry Clas uscourts.gov/four-digi			at best describes debtor. 5.		
8. Under which chapter of the Bankruptcy Code is the debtor filing?	Check one:  Chapter 7  Chapter 9  Chapter 11. Co	are less than \$:  The debtor is a business debto statement, and procedure in 11  A plan is being  Acceptances of accordance wit  The debtor is re Exchange Com attachment to N (Official Form 2)	small business r, attach the mo federal income U.S.C. § 1116( filed with this point the plan were shall be a the plan were shall be the plan were shall be a the plan were shall be a the plan were	debtor as defined st recent balance tax return or if all (1)(B). etition. solicited prepetition (126(b). eriodic reports (for ing to § 13 or 15(d) or for Non-Individuorm.	ts (excluding debts owed to instruct on 4/01/19 and every in 11 U.S.C. § 101(51D). If the sheet, statement of operation of these documents do not expend the second of the	3 years after that).  the debtor is a small s, cash-flow ist, follow the forceditors, in the Securities and Act of 1934. File the er Chapter 11	
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 District		When When		Case number  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 District	MELVIN CRESPO SAN JUAN	BORRERO When	12/15/15	Relationship  Case number, if known	PRESIDENT 15-09915	

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Debt	tor EMPANORTH, I	NC.	Document Page 3 of 10 Case number (if known)						
	Name								
11.	Why is the case filed in	n Che	Check all that apply:						
	this district?				ipal place of business, or principa or for a longer part of such 180 c	al assets in this district for 180 days immediately lays than in any other district.			
			A bankruptcy	case concerning de	btor's affiliate, general partner, or	partnership is pending in this district.			
12.	Does the debtor own of have possession of an		٧o						
	real property or person property that needs		☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.						
	immediate attention?		Why doe	es the property need	d immediate attention? (Check a	all that apply.)			
			☐ It pos	es or is alleged to po	se a threat of imminent and ident	ifiable hazard to public health or safety.			
			What i	s the hazard?					
			☐ It nee	ds to be physically se	ecured or protected from the wear	ther.			
						teriorate or lose value without attention (for example, s-related assets or other options).			
			☐ Other						
			Where is	the property?					
					Number, Street, City, State & Z	ZIP Code			
			Is the pr	operty insured?					
			☐ No						
			☐ Yes.	Insurance agency					
				Contact name					
				Phone					
	Statistical and ad	ministrat	ive informatio	<u> </u>					
12	Debtor's estimation of	- Inniistrat	Check one:						
13.	available funds	•	_						
					stribution to unsecured creditors.				
			☐ After any	y administrative expe	nses are paid, no funds will be av	vailable to unsecured creditors.			
14.	Estimated number of	■ 1	-49		<b>1</b> ,000-5,000	<b>2</b> 5,001-50,000			
	creditors	<b>□</b> 5	50-99		<u> </u>	<u> </u>			
			00-199		□ 10,001-25,000	☐ More than100,000			
		□ 2	200-999						

□ \$1,000,001 - \$10 million

□ \$10,000,001 - \$50 million

□ \$50,000,001 - \$100 million

□ \$100,000,001 - \$500 million

□ \$1,000,001 - \$10 million

□ \$10,000,001 - \$50 million

□ \$50,000,001 - \$100 million

□ \$100,000,001 - \$500 million

15. Estimated Assets

16. Estimated liabilities

**\$0 - \$50,000** 

□ \$0 - \$50,000

□ \$50,001 - \$100,000

□ \$100,001 - \$500,000

□ \$500,001 - \$1 million

□ \$50,001 - \$100,000

**\$100,001 - \$500,000** 

□ \$500,001 - \$1 million

□ \$500,000,001 - \$1 billion

☐ More than \$50 billion

☐ More than \$50 billion

□ \$500,000,001 - \$1 billion

□ \$1,000,000,001 - \$10 billion

□ \$10,000,000,001 - \$50 billion

□ \$1,000,000,001 - \$10 billion

□ \$10,000,000,001 - \$50 billion

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Debtor

EMPANORTH, INC.

Request for Relief, Declara	ition, and Signatures
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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.	<b>Declaration and signature</b>
	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 trued and correct.

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

Executed on April 6, 2016 MM / DD / YYYY

✗ /s/ MELVIN CRESPO BORRERO	MELVIN CRESPO BORRERO		
Signature of authorized representative of debtor	Printed name		
Title PRESIDENT			

#### 18. Signature of attorney

/s/ /S/ Gloria Justiniano Irizarry		Date April 6, 2016	
Signature of attorney for debtor		MM / DD / YYYY	
/S/ Gloria Justiniano Irizarry			
Printed name			
Firm name			
ENSANCHE MARTINEZ			
CALLE A. RAMIREZ SILVA #8			
Mayaguez, PR 00680  Number, Street, City, State & ZIP Code			
Trainbor, Groot, Grey, Glate & Zir Gode			
Contact phone <b>787 831-2577</b>	Email address	justinianolaw@gmail.com	

207603

Bar number and State

### Case:16-02677-BKT11 Doc#:1 Filed:04/06/16 Entered:04/06/16 09:52:18 Desc: Main Document Page 5 of 10

Fill in this information to identify the case:	
Debtor name EMPANORTH, INC.	
United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO	☐ Check if this is an
Case number (if known):	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

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,	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.		
		and government contracts)		Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
CRIM PO Box 195387 San Juan, PR 00919-5807		PROPERTY TAX ES				\$3,945.00
CRIM PO Box 195387 San Juan, PR 00919-5807		PROPERTY TAXES				\$3,000.00
Departament Of Labor PO Box 191020 Collection Unit 12th Floor San Juan, PR 00910-1020		UNEMPLOYMENT INSURANCE				\$19,703.00
Departament Of Labor PO Box 191020 Collection Unit 12th Floor San Juan, PR 00910-1020		UNEMPLOYMENT INSURANCE				\$2,500.00
Department Of Treasury PO Box 9024140 Off. 424.B Bankruptcy Section San Juan, PR 00902-4140		TAXES				\$3,000.00
IRS PO Box 7317 Philadelphia, PA 19101-7317				\$110,000.00	\$0.00	\$110,000.00
MUNICIPALITY OF HATILLO PUERTO RICO APARTADO 8 Hatillo, PR 00659		MUNICIPAL TAXES				\$6,000.00

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Debtor EMPANORTH, INC.					Case number (if known)
Name					
Name of	creditor and	Name, telephone number	Nature of claim	Indicate if claim	Amount of claim
complete	e mailing address,	and email address of	(for example, trade	is contingent,	If the claim is fully unsecured, fill in only unsecured claim amount. If
including zip code creditor contact		creditor contact	debts, bank loans,	unliquidated, or	claim is partially secured, fill in total claim amount and deduction for
		professional services,	disputed	value of collateral or setoff to calculate unsecured claim.	

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,	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	Deduction for value	Unsecured claim
				partially secured	of collateral or setoff	
State Insurance		DISABILITY				\$11,092.59
Fund		INSURANCE				
PO Box 365028						
San Juan, PR						
00936-5028						

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B2030 (Form 2030) (12/15)

## United States Bankruptcy Court District of Puerto Rico

In re	EMPANORTH, INC.		Case No.			
		Debtor(s)	Chapter	11		
	DISCLOSURE OF COM	PENSATION OF ATTOR	RNEY FOR DE	BTOR(S)		
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the rendered on behalf of the debtor(s) in contemplate	filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to		
	For legal services, I have agreed to accept		\$	0.00		
	Prior to the filing of this statement I have recei	ved	\$	0.00		
	Balance Due		\$	0.00		
2. T	The source of the compensation paid to me was:					
		IE DEBTOR PAID THE ATTORN DURLY WILL BE CHARGED	NEY \$1,000 FOR R	ETIANER FEES, \$200		
3. T	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4. <b>I</b>	■ I have not agreed to share the above-disclosed of	ompensation with any other person	unless they are memb	pers and associates of my law firm.		
[	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the					
5. I	n return for the above-disclosed fee, I have agreed	return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
b c	<ul> <li>Analysis of the debtor's financial situation, and r</li> <li>Preparation and filing of any petition, schedules.</li> <li>Representation of the debtor at the meeting of cr</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors</li> </ul>	statement of affairs and plan which editors and confirmation hearing, ar to reduce to market value; exe	may be required; and any adjourned hear emption planning;	rings thereof;		
	reaffirmation agreements and applic 522(f)(2)(A) for avoidance of liens or		and filing of motion	ons pursuant to 11 USC		
6. E	By agreement with the debtor(s), the above-disclose Representation of the debtors in any any other adversary proceeding.	ed fee does not include the following  / dischargeability actions, judi	g service: cial lien avoidance	es, relief from stay actions or		
		CERTIFICATION				
	certify that the foregoing is a complete statement cankruptcy proceeding.	of any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in		
A	oril 6, 2016	/s/ /S/ Gloria Just				
Date		<b>/S/ Gloria Justinia</b> Signature of Attorne	ano Irizarry 207603 ry	3		
		ENSANCHE MAR	•			
		CALLE A. RAMIR	EZ SILVA #8			
			Mayaguez, PR 00680			
			787 831-2577 Fax: 787 805-7350  justinianolaw@gmail.com  Name of law firm			
		Name of law firm				

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

In re <b>EMPANORTH, INC.</b>		Case No.	
	Debtor(s)	Chapter	11
VERIFICAT	TON OF CREDITOR MA	ATRIX	
I, the PRESIDENT of the corporation named as the d	lebtor in this case, hereby verify that t	he attached li	ist of creditors is true and
correct to the best of my knowledge.			
Date: April 6, 2016	/s/ MELVIN CRESPO BORRERO	OIDENT	
	MELVIN CRESPO BORRERO/PRE Signer/Title	SIDEN I	
	2.5		

EMPANORTH, INC. PO BOX 69001 SUITE 224 HATILLO, PR 00659 STATE INSURANCE FUND PO BOX 365028 SAN JUAN, PR 00936-5028

/S/ GLORIA JUSTINIANO IRIZARRY ENSANCHE MARTINEZ CALLE A. RAMIREZ SILVA #8 MAYAGUEZ, PR 00680

CRIM PO BOX 195387 SAN JUAN, PR 00919-5807

CRIM PO BOX 195387 SAN JUAN, PR 00919-5807

DEPARTAMENT OF LABOR PO BOX 191020 COLLECTION UNIT 12TH FLOOR SAN JUAN, PR 00910-1020

DEPARTAMENT OF LABOR PO BOX 191020 COLLECTION UNIT 12TH FLOOR SAN JUAN, PR 00910-1020

DEPARTMENT OF TREASURY PO BOX 9024140 OFF. 424.B BANKRUPTCY SECTION SAN JUAN, PR 00902-4140

IRS PO BOX 7317 PHILADELPHIA, PA 19101-7317

MUNICIPALITY OF HATILLO PUERTO RICO APARTADO 8 HATILLO, PR 00659

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## United States Bankruptcy Court District of Puerto Rico

In re	EMPANORTH, INC.		Case No.	
		Debtor(s)	Chapter	11
	CORPO	RATE OWNERSHIP STATEMENT (F	OIII F 7007 1\	
	CORIO	RATE OWNERSHII STATEMENT (E	XULE 7007.1)	
recusa (are) c	l, the undersigned counsel for _ corporation(s), other than the deb	ey Procedure 7007.1 and to enable the Jude EMPANORTH, INC. in the above captions of or a governmental unit, that directly deferests, or states that there are no entities to	ed action, certion indirectly ow	fies that the following is a vn(s) 10% or more of any
■ Nor	ne [Check if applicable]			
	6, 2016	/s/ /S/ Gloria Justiniano Irizarry	202	
Date		/S/ Gloria Justiniano Irizarry 2076 Signature of Attorney or Litigar Counsel for EMPANORTH, INC	nt	
		ENSANCHE MARTINEZ CALLE A. RAMIREZ SILVA #8 Mayaguez, PR 00680 787 831-2577 Fax:787 805-7350		

justinianolaw@gmail.com