Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 1 of 58

| in this information to ident | tify your case: | |
|--|---|---|
| ted States Bankruptcy Court | for the: | |
| STRICT OF PUERTO RICO | | |
| se number (if known) | Chapter | 11 |
| | | Check if this an amended filing |
| ficial Form 201 Dluntary Petiti | on for Non-Individuals Fili | ng for Bankruptcy 4/16 |
| ore space is needed, attach | n a separate sheet to this form. On the top of any ad | ditional pages, write the debtor's name and case number (if known). |
| Debtor's name | POWER COOLING CONTROLS, INC. | |
| All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names | | |
| Debtor's federal Employer Identification Number (EIN) | 66-0586956 | |
| Debtor's address | Principal place of business | Mailing address, if different from principal place of business |
| | SR 834 Km 4.7 Vega Street Sector Los Torres Villa Islena Bo Mamey II Guaynabo, PR Number, Street, City, State & ZIP Code | PO BOX 192817 SAN JUAN, PR 00919-2817 P.O. Box, Number, Street, City, State & ZIP Code |
| | Guaynabo County | Location of principal assets, if different from principal place of business |
| | | Number, Street, City, State & ZIP Code |
| Debtor's website (URL) | | |
| Type of debtor | ☐ Partnership (excluding LLP) | (LLC) and Limited Liability Partnership (LLP)) |
| | ficial Form 201 Dluntary Petiti ore space is needed, attachmore information, a separa Debtor's name All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names Debtor's federal Employer Identification Number (EIN) Debtor's address Debtor's website (URL) | ficial Form 201 Dluntary Petition for Non-Individuals Fili ore space is needed, attach a separate sheet to this form. On the top of any ad more information, a separate document, Instructions for Bankruptcy Forms for Debtor's name POWER COOLING CONTROLS, INC. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names Debtor's federal Employer Identification Number (EIN) Debtor's address Principal place of business SR 834 Km 4.7 Vega Street Sector Los Torres Villa Islena Bo Mamey II Guaynabo, PR Number, Street, City, State & ZIP Code Guaynabo County Debtor's website (URL) Type of debtor Corporation (including Limited Liability Company Partnership (excluding LLP) |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

Document Page 2 of 58
Case number (if known) Debtor POWER COOLING CONTROLS, INC 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)) C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.uscourts.gov/four-digit-national-association-naics-codes. Under which chapter of the 8. Check one: Bankruptcy Code is the ☐ Chapter 7 debtor filing? ☐ Chapter 9 Chapter 11. Check all that apply: Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 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 operations, 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

Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

No.

If more than 2 cases, attach a

☐ Yes.

separate list.

When District 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,

District

attach a separate list

Debtor Relationship Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

Document Page 3 of 58

Case COOLING CONTROLS, INC.

Debtor POWER COOLING CONTROLS, INC.

| 11. | Why is the case filed in this district? | Check all that apply: | | | | | | | | |
|-----|--|--|---------------------------|--|--|---|--|--|--|--|
| | this district? | | | • | cipal place of business, or principal asse n or for a longer part of such 180 days th | ets in this district for 180 days immediately an in any other district. | | | | |
| | | | A bankruptcy | / case concerning de | ebtor's affiliate, general partner, or partner | ership is pending in this district. | | | | |
| 12. | Does the debtor own or | ■ N | No | | | | | | | |
| | have possession of any real property or personal property that needs | | es. Answer b | pelow for each prope | erty that needs immediate attention. Atta | ch additional sheets if needed. | | | | |
| | immediate attention? | | Why doe | es the property nee | d immediate attention? (Check all that | apply.) | | | | |
| | | | | es or is alleged to point is the hazard? | ose a threat of imminent and identifiable | hazard to public health or safety. | | | | |
| | | | ☐ It nee | ds to be physically s | secured or protected from the weather. | | | | | |
| | | | _ | | ds or assets that could quickly deterioral meat, dairy, produce, or securities-relat | te or lose value without attention (for example, ed assets or other options). | | | | |
| | | | ☐ Other | | | | | | | |
| | | | Where is | s the property? | | | | | | |
| | | | | | Number, Street, City, State & ZIP Co | de | | | | |
| | | | Is the pr | operty insured? | | | | | | |
| | | | ☐ No | | | | | | | |
| | | | ☐ Yes. | Insurance agency | | | | | | |
| | | | | Contact name | | | | | | |
| | | | | Phone | | | | | | |
| | | | | | | | | | | |
| | Statistical and admin | istrat | ive informatio | n | | | | | | |
| 13. | Debtor's estimation of | | Check one. | - | | | | | | |
| | available funds | ■ Funds will be available for distribution to unsecured creditors. | | | | | | | | |
| | | | ☐ After an | y administrative expe | enses are paid, no funds will be available | e to unsecured creditors. | | | | |
| 14. | Estimated number of | ■ 1 | -49 | | 1 ,000-5,000 | 25,001-50,000 | | | | |
| | creditors | _ | 50-99 | | 5001-10,000 | 5 0,001-100,000 | | | | |
| | | | 00-199 | | 1 0,001-25,000 | ☐ More than100,000 | | | | |
| | | | 200-999 | | | | | | | |
| 15. | Estimated Assets | □\$ | 80 - \$50,000 | | □ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion | | | | |
| | | □ \$ | 550,001 - \$100, | 000 | ☐ \$10,000,001 - \$50 million | ☐ \$1,000,000,001 - \$10 billion | | | | |
| | | □ \$100,001 - \$500,000 | | | ☐ \$50,000,001 - \$100 million | ☐ \$10,000,000,001 - \$50 billion | | | | |
| | | ■ \$ | ■ \$500,001 - \$1 million | | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | | |
| 16. | Estimated liabilities | □ \$ | 60 - \$50,000 | | □ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | | |
| | | | \$50,001 - \$100 | ,000 | ☐ \$10,000,001 - \$50 million | ☐ \$1,000,000,001 - \$10 billion | | | | |
| | | ■ \$ | \$100,001 - \$500 | 0,000 | ☐ \$50,000,001 - \$100 million | ☐ \$10,000,000,001 - \$50 billion | | | | |
| | | □ \$ | \$500,001 - \$1 million | | ☐ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | | |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Page 4 of 58 Case number (if known) Document

Debtor

POWER COOLING CONTROLS, INC

Request for Relief, Declaration, and Signatures

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 trued and correct.

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

Executed on November 17, 2016 MM / DD / YYYY

| X | //s/ William del Pilar Muñoz | William del Pilar Muñoz |
|---|--|-------------------------|
| | Signature of authorized representative of debtor | Printed name |
| | Title President | |

18. Signature of attorney

| X | /s/ Lyssette | e A Morales Vidal | | Date | November 17, 2016 | |
|---|--|------------------------|---------------|----------|-----------------------|--|
| | Signature of attor | rney for debtor | | | MM / DD / YYYY | |
| | | Morales Vidal | | | | |
| | Printed name | | | | | |
| | L.A. MORALE | S & ASSOCIATES P. | S.C. | | | |
| | Firm name | | | | | |
| | URB VILLA B 76 AQUAMARI Caguas, PR | NA | | | | |
| | Number, Street, 0 | City, State & ZIP Code | | | | |
| | | | | | | |
| | Contact phone | 787-746-2434 | Email address | lamorale | eslawoffice@gmail.com | |

120011 Bar number and State

Official Form 201

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 5 of 58

United States Bankruptcy Court District of Puerto Rico

| In re | POWER | COOLING | CONTROLS, | INC. | Case No. | | |
|-------|-------|---------|-----------|------|-----------|---------|----|
| , | | | | | Debtor(s) | Chapter | 11 |

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

I, William del Pilar Muñoz, declare under penalty of perjury that I am the President of POWER COOLING CONTROLS, INC., and that the following is a true and correct copy of the resolutions adopted by the Board of Directors of said corporation at a special meeting duly called and held on the 22 day of August, 2016.

"Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that William del Pilar Muñoz, President of this Corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that William del Pilar Muñoz, President of this Corporation is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case, and

Be It Further Resolved, that William del Pilar Muñoz, President of this Corporation is authorized and directed to employ Lyssette A Morales Vidal 120011, attorney and the law firm of L.A. MORALES & ASSOCIATES P.S.C. to represent the corporation in such bankruptcy case."

| Date | November 12, 2016 | Signed | /s/ | Will | iam | del Pi | ilar Muñoz | |
|------|-------------------|--------|------|------|-----|--------|------------|--|
| | | | Will | liam | del | Pilar | Muñoz | |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 6 of 58

Resolution of Board of Directors

of

POWER COOLING CONTROLS, INC.

Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that William del Pilar Muñoz, President of this Corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that William del Pilar Muñoz, President of this Corporation is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case, and

Be It Further Resolved, that William del Pilar Muñoz, President of this Corporation is authorized and directed to employ Lyssette A Morales Vidal 120011, attorney and the law firm of L.A. MORALES & ASSOCIATES P.S.C. to represent the corporation in such bankruptcy case.

| Date | August | 22, | 2016 | Signed _ | W. del Pilar Munoz |
|------|--------|-----|------|----------|--------------------|
| | | | | | O |
| Date | August | 22, | 2016 | Signed | |

| Fill in this information to identify the case: | | | | | | |
|---|------------------------------------|--|--|--|--|--|
| Debtor name POWER COOLING CONTROLS, INC. | | | | | | |
| United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO | | | | | | |
| Case number (if known) | | | | | | |
| | Check if this is an amended filing | | | | | |

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud 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.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- ☐ Amended Schedule
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration
 Voluntary Petition
 List of Creditors

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

Executed on November 17, 2016

X/s/ William del Pilar Muñoz Signature of individual signing on behalf of debtor

William del Pilar Muñoz

Printed name

President

Position or relationship to debtor

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 8 of 58

| Fill in this infor | Fill in this information to identify the case: | | | | | | |
|--------------------|---|-----------------------|--|--|--|--|--|
| Debtor name | POWER COOLING CONTROLS, INC. | | | | | | |
| United States I | 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, and government | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully uns claim is partially secul value of collateral or s | t and deduction for | |
|---|--|---|---|---|---|-----------------|
| | | contracts) | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 | | Supplier | | | | \$240.00 |
| CRIM BANKRUPTCY DIVISION PO BOX 195387 San Juan, PR 00919 | | Noticing Purposes | | | | Unknown |
| ELA DEPT OF TREASURY Bankruptcy Div Ofic 424 B PO BOX 9024140 San Juan, PR 00902-0140 | | Noticing Purposes | | | | Unknown |
| IRS PO BOX 7346 Philadelphia, PA 19101-7346 | | Noticing Purposes | | | | \$388.32 |
| Jaime Rodriguez Rivera 30 Repto Pineiro St GUAYNABO, PR 00969-5650 | | Supplier | | | | \$210.00 |
| JWD ENGINEERING Corp PO BOX 3645 GUAYNABO, PR 00970 | | Salaries & Wages Employees of Corp | Disputed Subject to Setoff | | | \$1.00 |
| MUNICIPALITY OF GUAYNABO PO BOX 7885 GUAYNABO, PR 00970 | | Patent | | | | \$15,308.93 |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 9 of 58

Debtor POWER COOLING CONTROLS, INC. 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 | |
| MUNICIPALITY OF GUAYNABO PO BOX 7885 GUAYNABO, PR 00970 | | Municipal Patents Payment Plan \$14,742.49 11/23/2015 PCC will continue payment plan \$409.64 x 36 mos n order to conserve Amnesty of entire debt of \$ | | | | \$10,236.45 | |
| ORIENTAL BANK PO BOX 195115 San Juan, PR 00919-5115 | | Line of Credit 664003437 664010105 664010113 | Disputed | | | \$227,529.00 | |
| Oriental f/k/a Eurobank PO Box 364745 San Juan, PR 00936-4745 | | Bo Mamey SR 834 KM 4.7 Vega St Los Torres Guaynabo Note \$29,327 PAID @ F 11 T 627 FCA# 25,468 Bis | Disputed | | | \$1.00 | |
| Refricentro 380 Barbosa Ave SAN JUAN, PR 00917 | | Supplier | | | | \$600.00 | |
| Stericycle Comsol 26604 Network Place CHICAGO, IL 60673-1266 | | Supplier | | | | \$376.84 | |
| To Holder of \$35,000 Note Unknown/Paid/Dis puted Holder | | Mortgage Note \$35,000 lost not cancelled as of yet | Disputed | | | \$1.00 | |
| Trane PR Inc PO Box 9000 SAN JUAN, PR 00908-9000 | | Supplier/Criti cal Vendor | | | | \$1,196.14 | |
| VPNET PO Box 193780 SAN JUAN, PR 00919-3780 | | Supplier | | | | \$149.00 | |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

Document Page 10 of 58

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

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

| Par | 11: Summary of Assets | | |
|-----|--|------|------------|
| 1. | Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B) | | |
| | 1a. Real property: Copy line 88 from Schedule A/B | \$_ | 460,000.00 |
| | 1b. Total personal property: Copy line 91A from <i>Schedule A/B</i> | \$_ | 433,345.01 |
| | 1c. Total of all property: Copy line 92 from <i>Schedule A/B</i> | \$_ | 893,345.01 |
| Par | 2: Summary of Liabilities | | |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D | \$_ | 124,799.21 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) | | |
| | 3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F | \$_ | 15,697.25 |
| | 3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> | +\$_ | 248,679.54 |
| 4. | Total liabilities Lines 2 + 3a + 3b | \$ | 389,176.00 |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

| | Docu | ment Page 11 of 58 | | 11,11,10 1.001 |
|---|--|---|--|--|
| Fill in | this information to identify the case: | | | |
| Debto | orname POWER COOLING CONTROLS, INC. | | | |
| Linite | d States Bankruptcy Court for the: DISTRICT OF PUER | TO RICO | | |
| Ornice | DOTAGO DELINITADIOS COUNTROL DIGITAGO OF FOLIA | 10 1100 | | |
| Case | number (if known) | | _ | Chack if this is an |
| | | | L | Check if this is an amended filing |
| | | | | · · |
| ~ · · · | | | | |
| | <u>icial Form 206A/B</u> | | | |
| Scl | nedule A/B: Assets - Real aı | nd Personal Pro | perty | 12/15 |
| which or une Be as the de addition For P scheet debto Part 1. Doe | No. Go to Part 2. Yes Fill in the information below. | or assets that were not capitality Contracts and Unexpired Leadedd, attach a separate sheet of the form and line number to wittachment in the total for the poriate category or attach separate each asset in a particular cates. See the instructions to under | ized. In Schedule A/B, list ases (Official Form 206G to this form. At the top of thich the additional information ertinent part. te supporting schedules egory. List each asset or | et any executory contracts). of any pages added, write mation applies. If an s, such as a fixed asset ally once. In valuing the this form. |
| All 2. | cash or cash equivalents owned or controlled by the c | debtor | | Current value of debtor's interest |
| ۷. | Cash on Hand | | | \$6,000.00 |
| 3. | Checking, savings, money market, or financial brol Name of institution (bank or brokerage firm) | xerage accounts (Identify all) Type of account | Last 4 digits of accounumber | ınt |
| | O.A. Oudantal Bank | Checking Acct | F022 | ¢502 13 |
| | 3.1. Oriental Bank | #0614005033 | 5033 | \$583.13 |
| 4. | Other cash equivalents (Identify all) | | | |
| 5. | Total of Part 1. | | | \$6,583.13 |
| | Add lines 2 through 4 (including amounts on any additi | onal sheets). Copy the total to lin | e 80. | |
| Part 2 | Deposits and Prepayments | | | |
| 6. Doe | s the debtor have any deposits or prepayments? | | | |
| _ | No. Go to Part 3. | | | |
| | Yes Fill in the information below. | | | |
| _ | | | | |
| Part 3 | Accounts receivable | | | |
| 10. Do | es the debtor have any accounts receivable? | | | |

11. Accounts receivable

■ Yes Fill in the information below.

☐ No. Go to Part 4.

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 12 of 58

| Debtor | POWER COOLING CONTROLS, INC. Name Case number (If known) | | | |
|--------|--|------------------------|--|--------------|
| | 11a. 90 days old or less: | 349,401.91 face amount | - 156, 970.84 = doubtful or uncollectible accounts | \$192,431.07 |
| | 11a. 90 days old or less: | 880.00 face amount | - 440.00 = doubtful or uncollectible accounts | \$440.00 |
| | 11a. 90 days old or less: | 22,586.00 face amount | - 11,293.00 = doubtful or uncollectible accounts | \$11,293.00 |
| | 11a. 90 days old or less: | 38,113.98 face amount | - 19,056.99 = doubtful or uncollectible accounts | \$19,056.99 |
| | 11a. 90 days old or less: | 800.80 face amount | $\frac{400.40}{\text{doubtful or uncollectible accounts}} = \dots$ | \$400.40 |
| | 11a. 90 days old or less: | 14,513.00 face amount | $\frac{0.00}{\text{doubtful or uncollectible accounts}} = \dots$ | \$14,513.00 |
| | 11a. 90 days old or less: | 920.00 face amount | $\frac{460.00}{\text{doubtful or uncollectible accounts}} = \dots$ | \$460.00 |
| | 11b. Over 90 days old: | 47,934.00 face amount | - 100.00 = doubtful or uncollectible accounts | \$47,834.00 |
| | 11b. Over 90 days old: | 106,577.10 face amount | - 81,335.75 = doubtful or uncollectible accounts | \$25,241.35 |
| | 11b. Over 90 days old: | 31,964.00 face amount | - 15,982.00 = doubtful or uncollectible accounts | \$15,982.00 |
| | 11b. Over 90 days old: | 5,292.16 face amount | - 2,646.08 = doubtful or uncollectible accounts | \$2,646.08 |
| | 11b. Over 90 days old: | 31,974.98 face amount | - 15,987.49 = doubtful or uncollectible accounts | \$15,987.49 |
| | 11b. Over 90 days old: | 1,380.00 face amount | - 920.00 = doubtful or uncollectible accounts | \$460.00 |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 13 of 58

| Debtor | POWER COOLING Name | CONTROLS, INC. | | Case | e number (If known) | |
|--------------------------|---|--|------------------|--|---|------------------------------------|
| | 11h Over 90 days old: | 17 833 | 1 0 | 2 | 23,916.50 = | \$23,916.50 |
| | 11b. Over 90 days old: | face amount | | ubtful or uncollect | | |
| 12. | Total of Part 3. | | | | | \$370,661.88 |
| | Current value on lines 11 | 1a + 11b = line 12. Copy the | total to line 82 | | | |
| Part 4: | Investments | | | | | |
| 13. Doe s | s the debtor own any inv | restments? | | | | |
| ■ No | o. Go to Part 5. | | | | | |
| ☐ Ye | es Fill in the information be | elow. | | | | |
| | | | | | | |
| Part 5: | | g agriculture assets | | | | |
| 18. Does | s the deptor own any inv | ventory (excluding agricult | ure assets)? | | | |
| ■ No | o. Go to Part 6. | | | | | |
| ☐ Ye | es Fill in the information be | elow. | | | | |
| Dowl 0 | Familia is and California | | | | . n | |
| Part 6: 27. Doe s | | g-related assets (other than e any farming and fishing- | | | <u> </u> |)? |
| | | | | • | | , |
| | o. Go to Part 7. | ala | | | | |
| ∐ Y€ | es Fill in the information be | elow. | | | | |
| Part 7: | Office furniture, fixt | tures, and equipment; and | collectibles | | | |
| | | e any office furniture, fixtu | | t, or collectibles | s? | |
| | o. Go to Part 8. | | | | | |
| _ | es Fill in the information be | elow. | | | | |
| | | | No. the | -11 | Malaratian mathed and and | 0 |
| | General description | | debtor | ok value of 's interest e available) | Valuation method used for current value | Current value of debtor's interest |
| 39. | Office furniture | | | | | |
| 40. | Office fixtures | | | | | |
| 41. | Office equipment, inclu communication system | uding all computer equipm ns equipment and software Equipment \$2,800 cc | • | | | |
| | in 2007 fully de | preciated pment \$1,840.82 cos | | | | |
| | Mini Split 10,00 fully depreciate | 0 \$550 cost 2007 | , | | | |
| | fully depreciate | | | | | |
| | depreciated | cost in 2007 fully | | | | |
| | fully depreciate Dell Server \$5,0 | 0 \$680 cost in 2008 d 69.26 in 2007 full _y | | | | |
| | depreciated Printer Canon Important Cost in 2008 full | age Class \$640.93 ly depreciated | | \$0.00 | Tax records | Unknown |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 14 of 58

| Debtor | POWER COOLING CONTROLS, INC. Name | Case | number (If known) | |
|-----------------|---|--|-----------------------|-------------------|
| | | | | |
| | Office Furniture 14 Desks | | | |
| | 42 Chairs | | | |
| | 13 Modules 35 Files | | | |
| | 9 Battery Backup | | | |
| | 4 Mini Splits TGM 2 Mini Refrigerators | | | |
| | 2 Microwave 1 TV 27" | | | |
| | Furniture is completely depreciated | *0.00 | _ , | 40 500 00 |
| | in books w/ little residual value | \$0.00 | Tax records | \$2,500.00 |
| | 8 PC Computers & 16 Monitors | | | |
| | 14 Printers/Scanner HP | | | |
| | Cannon Photocopy D 1320 Brother Fax 4100E | | | |
| | Completely depreciated in PCC's books | | | |
| | <pre>w/ little residual value Android Smartphone</pre> | | | |
| | Completely depreciated & very little residual value | \$0.00 | Tax records | \$500.00 |
| | Testual value | <u> </u> | | · |
| 40 | 5.11 | | | |
| 42. | Collectibles <i>Examples</i> : Antiques and figurines; paintings, books, pictures, or other art objects; china and crystal; star | | | |
| | collections, other collections, memorabilia, or collectibles 42.1. Accounting Software Peachtree | | | |
| | Office - Management | | | |
| | Brother ML 100 Typewriter Norstar +Compact Telephone | | | |
| | System System | \$0.00 | Tax records | \$100.00 |
| | | | | |
| 43. | Total of Part 7. | | | \$3,100.00 |
| 70. | Add lines 39 through 42. Copy the total to line 86. | | | Ψ3,100.00 |
| 44. | Is a depreciation schedule available for any of the prop | perty listed in Part 7? | | |
| | ■ No | | | |
| | Yes | | | |
| 45. | Has any of the property listed in Part 7 been appraised | by a professional within | the last year? | |
| | ■ No | | | |
| | ☐ Yes | | | |
| Part 8: | Machinery, equipment, and vehicles | | | |
| 46. Does | the debtor own or lease any machinery, equipment, or | vehicles? | | |
| □ No | o. Go to Part 9. | | | |
| ■ Ye | es Fill in the information below. | | | |
| | General description | Net book value of | Valuation method used | Current value of |
| | Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) | debtor's interest (Where available) | for current value | debtor's interest |
| 47. | Automobiles, vans, trucks, motorcycles, trailers, and ti | itled farm vehicles | | |
| | 47.1. 2006 Ford Ranger Super Cab | | | |
| | Fully depreciated in books, | 60.00 | Tay records | IIn len a |
| | residual value unknown | \$0.00 | Tax records | Unknown |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 15 of 58

| Debtor Po | OWER COOLING CONTROLS, INC. | Case | number (If known) | |
|-----------|---|--------|-------------------|-------------|
| | ame 2006 Ford Ranger Super Cab Cost \$18,300 in 2006 fully depreciated in books | \$0.00 | Tax records | Unknown |
| 47.3. | 2006 Ford F-150 4 x 2 Cost \$20,895 but fully depreciated in books, residual value unknown | \$0.00 | Tax records | Unknown |
| 47.4. | 2006 Ford E-250 Van VIN #1FTNE24W56HB29038 68,188 Miles Value based on depreciation in books, residual value is unknown | \$0.00 | Tax records | Unknown |
| 47.5. | 1999 Ford Ranger Regular Cab [White] 86,331 Miles Plate 637-283 Cost \$5,000 but fully depreciated in books & in need of repair due to lack of use \$2,286 less repair | \$0.00 | Tax records | Unknown |
| 47.6. | 1996 Ford Ranger VIN #1FTCR10U8TTA300668 32,047 Miles Cost \$4,500 in 4/2007 Fully depreciated in books, value unknown & in need of repair Completely depreciated in books, residual value is opinion of PCC Inc less repairs for lack of use Residual value @ approx \$2,600 less repair for lack of use | \$0.00 | Tax records | Unknown |
| 47.7. | 1978 Ford LT 8000 Utility Truck Caterpillar 3208 Utility VIN # UVBODVCBG432 2,900 Miles Plate H 21005 Cost \$8,329 in 7/2006 Value based on depreciatio in books, value is unknown & in need of repair Titled to DdelPM but equitable ownership is in Corp | \$0.00 | Comparable sale | \$5,000.00 |
| 47.8. | 2000 International 4000 Series 4700 Boom Truck 48,282 Miles Plate H 27154 | \$0.00 | Comparable sale | \$48,000.00 |
| 47.9. | Trailer 40' w/ Chassis & Brake System Cost in 2008 \$5,000 Completely depreciated in books, residual value unknown & in need of repair | \$0.00 | Tax records | Unknown |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 16 of 58

| | DWER COOLING CONTROLS, INC. | Case | number (If known) | |
|------------|---|---------|-------------------|---------|
| | Trailer 40' w/o Chassis [blue] Cost in 2008 \$1,750 Completely depreciated in books, residual value is unknown & in need of repair | \$0.00 | Tax records | Unknown |
| 47.11 | (3) Trailers 20' w/o Chassis [red] Cost in 2008 \$5,250 Completely depreciated in books, residual value is unknown & in need of repair | \$0.00 | Tax records | Unknown |
| 47.12 · | 1998 Chevrolet C3500 Truck & Welding Machine VIN 3 IGBJC34R3WF004978 Completely depreciated in books, residual value is unknown & in need of repair | \$0.00 | Tax records | Unknown |
| 47.13 | 1998 Chevrolet C3500 Lifter Truck VIN # GBJC34R4WF005881 Completely depreciated in books, residual value is unknown & in need of repair | \$0.00 | Tax records | Unknown |
| 47.14 · | 1997 Chevrolet C3500 Super Cab VIN #1GCGC33R1VF017735 116,773 Miles Completely depreciated in books, residual value is unknown & in need of repair | \$0.00 | Tax records | Unknown |
| 47.15 | 1997 Chevrolet Lumina LS VIN #2GIWL52M8V9292615 144,539 Miles Completely depreciated in books, residual value is unknown in need of repair | \$0.00 | Tax records | Unknown |
| 47.16 · | 1997 Ford Econoline E150 VIN #1FTEE1426VHB68534 Completely depreciated in books, residual value is unknown & in need of repair | Unknown | Tax records | Unknown |
| 47.17 | 1998 Ford Ranger VIN #1FTYR1CU1WVA65927 185,170 Miles Completely depreciated in books, residual value is unknown & in need of repair | \$0.00 | Tax records | Unknown |
| 47.18 | 1998 Ford Ranger Regular Cab VIN #1FTYR10U2WTA05208 165,672 Miles Completely depreciated in books, residual value is unknown & in | | | |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 17 of 58

| Unknown |
|-------------|
| Unknown |
| Unknown |
| Unknown |
| |
| |
| \$53,000.00 |
| |
| |
| |
| |
| |
| |
| |
| |
| |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 18 of 58

POWER COOLING CONTROLS, INC. Debtor Case number (If known) Name Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available. 55.1. Propety Bo. Mamey State Road 834 KM 4.7 Vega ST Los Torres Guaynabo on 1.5056 cuerda lot @ F 11 T 627 FCA# 25,468 Bis; Value as per Comparable Sales 4/1/2016 Titled to its President but only as to Bare Legal Title legal interest is Fee simple \$0.00 Comparable sale \$160,000.00 in corporation 55.2. Undeveloped lot of land 96,353.67 s/m Hatillo PR previously mortgaged [2] w/ R & G in 2001 & Eurobank in 2007 have been paid off by PCC in 2011 but not cancelled upon info & belief of PCC. PCC suffered a loss of property from Pres's car while parked & the Notes may have been lost to theft. Titled to Luis Gerald del Pilar & Ivelisse Rodríguez, spouse but only as to Bare Legal Title. Will recover from title holders since PCC Inc. has equitable ownership & title holders have no Equitable ownership \$300,000.00 ownership \$0.00 Comparable sale interest. 56. Total of Part 9. \$460,000.00 Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88. Is a depreciation schedule available for any of the property listed in Part 9? 57. ■ No ☐ Yes

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 19 of 58

| Deptor | POWER COOLING CONTROLS, INC. | Case number (If known) | |
|----------------|--|--------------------------------------|--|
| | Name | | |
| 58. | Has any of the property listed in Part 9 been appraised by | a professional within the last year? | |
| | ■ No | | |
| | □ Yes | | |
| Part 10: | Intangibles and intellectual property | | |
| 9. Does | the debtor have any interests in intangibles or intellectua | I property? | |
| ■ No | . Go to Part 11. | | |
| ☐ Ye | s Fill in the information below. | | |
| Part 11: | All other assets | | |
| - | the debtor own any other assets that have not yet been rede all interests in executory contracts and unexpired leases no | • | |
| ■ No | . Go to Part 12. | | |

 $\hfill \square$ Yes Fill in the information below. Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 20 of 58

Debtor POWER COOLING CONTROLS, INC.

Name

Case number (If known)

Part 12: Summary

| In Pa | rt 12 copy all of the totals from the earlier parts of the form | | |
|-------|--|------------------------------------|--------------------------------|
| | Type of property | Current value of personal property | Current value of real property |
| 80. | Cash, cash equivalents, and financial assets. Copy line 5, Part 1 | \$6,583.13 | |
| 81. | Deposits and prepayments. Copy line 9, Part 2. | \$0.00 | |
| 82. | Accounts receivable. Copy line 12, Part 3. | \$370,661.88 | |
| 83. | Investments. Copy line 17, Part 4. | \$0.00 | |
| 84. | Inventory. Copy line 23, Part 5. | \$0.00 | |
| 85. | Farming and fishing-related assets. Copy line 33, Part 6. | \$0.00 | |
| 86. | Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7. | \$3,100.00 | |
| 87. | Machinery, equipment, and vehicles. Copy line 51, Part 8. | \$53,000.00 | |
| 88. | Real property. Copy line 56, Part 9 | > | \$460,000.00 |
| 89. | Intangibles and intellectual property. Copy line 66, Part 10. | \$0.00 | |
| 90. | All other assets. Copy line 78, Part 11. | +\$0.00 | |
| 91. | Total. Add lines 80 through 90 for each column | \$433,345.01 | + 91b. \$460,000.00 |
| 92. | Total of all property on Schedule A/B. Add lines 91a+91b=92 | | \$893,345.01 |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

| | | Document Page 21 of 58 | | 11/17/16 7:00PN |
|---------------|---|---|--|------------------------------------|
| Fill in this | information to identify the | case: | | |
| Debtor nan | ne POWER COOLING CO | ONTROLS, INC. | | |
| United Stat | tes Bankruptcy Court for the: | DISTRICT OF PUERTO RICO | | |
| Coco numb | oor (if Impum) | | | |
| Case numi | OET (if known) | | | Check if this is an amended filing |
| Official I | Form 206D | | | |
| | | Who Have Claims Secured by Pr | operty | 12/15 |
| Be as comple | ete and accurate as possible. | | - | |
| 1. Do any cre | editors have claims secured by | debtor's property? | | |
| ☐ No. | Check this box and submit pa | age 1 of this form to the court with debtor's other schedules. | Debtor has nothing else | to report on this form. |
| ■ Yes | Fill in all of the information b | nelow. | _ | |
| | List Creditors Who Have Se | | | |
| | | o have secured claims. If a creditor has more than one secured | Column A | Column B |
| | e creditor separately for each claim | | Amount of claim | Value of collateral |
| | | | Do not deduct the value of collateral. | that supports this claim |
| | ENTAL BANK | Describe debtor's property that is subject to a lien | \$124,799.21 | \$160,000.00 |
| PO E San | or's Name 30X 195115 Juan, PR 19-5115 | Bo Mamey SR 834 KM 4.7 Vega ST Los Torres Guaynabo @ F 11 T 627 FCA# 25,468 Bis Titled to its President but only has Bare Legal Title | | |
| Credito | or's mailing address | Describe the lien | | |
| | | First Mortgage Is the creditor an insider or related party? | | |
| | | ■ No | | |
| Credito | or's email address, if known | Yes Is anyone else liable on this claim? | | |
| Date o | debt was incurred | No | | |
| | 01/02 I digits of account number | ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H) | | |
| Do mu | ultiple creditors have an st in the same property? | As of the petition filing date, the claim is: Check all that apply | | |
| ■ No |) | ☐ Contingent | | |
| _ | es. Specify each creditor, ing this creditor and its relative | ☐ Unliquidated☐ Disputed | | |
| priority | y. | | | |
| 3. Total of | the dollar amounts from Part 1 | Column A, including the amounts from the Additional Page, if a | \$124,799.2 1 | |
| Part 2: Li | ist Others to Re Notified for | a Debt Already Listed in Part 1 | | |
| | | ust be notified for a debt already listed in Part 1. Examples of en | tities that may be listed are | collection agencies |
| assignees o | of claims listed above, and attori | neys for secured creditors. | • | |
| | need to notified for the debts lise and address | sted in Part 1, do not fill out or submit this page. If additional pag On w | es are needed, copy this pa hich line in Part 1 did you | age. Last 4 digits of |

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Official Form 206D

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 22 of 58 Fill in this information to identify the case: Debtor name POWER COOLING CONTROLS, United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO Case number (if known) ☐ Check if this is an amended filing Official Form 206E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form. Part 1: List All Creditors with PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507). ■ No. Go to Part 2. Yes. Go to line 2. 2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1. Total claim Priority amount 2.1 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown Unknown Check all that apply. BANKRUPTCY DIVISION □ Contingent PO BOX 195387 ☐ Unliquidated San Juan, PR 00919 ■ Disputed Date or dates debt was incurred Basis for the claim: Noticing Purposes Last 4 digits of account number Is the claim subject to offset? Specify Code subsection of PRIORITY No unsecured claim: 11 U.S.C. § 507(a) (8) ☐ Yes Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown Unknown ELA DEPT OF TREASURY Check all that apply. Bankruptcy Div Ofic 424 B ☐ Contingent PO BOX 9024140 ■ Unliquidated San Juan, PR 00902-0140 ☐ Disputed

Date or dates debt was incurred

Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

Basis for the claim:

Noticing Purposes Is the claim subject to offset?

No

☐ Yes

Official Form 206F/F

| Name | | | | | | |
|---|--|---|--|--|---|--|
| Priority creditor's name and mailing address IRS PO BOX 7346 Philadelphia, PA 19101-7346 | Check all that apply. 7346 □ Contingent | | | | | |
| Date or dates debt was incurred 2Q/2016 & 3Q/2016 | | | | | | |
| Last 4 digits of account number 6956 | Is the claim | subject to offset? | | | | |
| Specify Code subsection of PRIORITY | ■ No | | | | | |
| unsecured claim. 11 0.0.0. § 307 (a) (<u>u</u>) | Yes | | | | | |
| Priority creditor's name and mailing address MUNICIPALITY OF GUAYNABO PO BOX 7885 GUAYNABO, PR 00970 | Check all the | hat apply. ent | \$15,308 | .93 | \$15,308.9 | |
| | ☐ Disputed | d | | | | |
| Date or dates debt was incurred 2012–2013 | Patent | e claim: | | | | |
| Last 4 digits of account number 6956 | Is the claim | subject to offset? | | | | |
| Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | ■ No □ Yes | | | | | |
| | Incomurad C | Noime | | | | |
| List All Creditors with NONPRIORITY List in alphabetical order all of the creditors with out and attach the Additional Page of Part 2. | | Claims Unsecured claims. If the debtor has more than 6 creditors | with nonpriority | | red claims, fill | |
| List in alphabetical order all of the creditors with out and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address | n nonpriority u | | | | | |
| List in alphabetical order all of the creditors with out and attach the Additional Page of Part 2. | n nonpriority u | As of the petition filing date, the claim is: Check all that | | | ount of claim | |
| List in alphabetical order all of the creditors with out and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address: Andres Rodriguez Burgos | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated | | | ount of claim | |
| List in alphabetical order all of the creditors without and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed | | | ount of claim | |
| List in alphabetical order all of the creditors with out and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address: Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Supplier | | | ount of claim | |
| List in alphabetical order all of the creditors without and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed | | | ount of claim | |
| List in alphabetical order all of the creditors without and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 Last 4 digits of account number 4526 Nonpriority creditor's name and mailing address IVETTE MONTES LEBRON, Esq PO BOX 11850 STE 102 | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Contingent | apply. | | ount of claim | |
| List in alphabetical order all of the creditors without and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 Last 4 digits of account number 4526 Nonpriority creditor's name and mailing address IVETTE MONTES LEBRON, Esq PO BOX 11850 STE 102 San Juan, PR 00922-1850 | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Contingent Unliquidated | apply. | | \$240.00 | |
| List in alphabetical order all of the creditors without and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 Last 4 digits of account number 4526 Nonpriority creditor's name and mailing address IVETTE MONTES LEBRON, Esq PO BOX 11850 STE 102 San Juan, PR 00922-1850 Date(s) debt was incurred 2010 | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Unliquidated Disputed Is the claim subject to offset? No Yes | apply. | | \$240.00 | |
| List in alphabetical order all of the creditors without and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 Last 4 digits of account number 4526 Nonpriority creditor's name and mailing address IVETTE MONTES LEBRON, Esq PO BOX 11850 STE 102 San Juan, PR 00922-1850 | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Contingent Unliquidated | apply. | | \$240.00 | |
| List in alphabetical order all of the creditors without and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 Last 4 digits of account number 4526 Nonpriority creditor's name and mailing address IVETTE MONTES LEBRON, Esq PO BOX 11850 STE 102 San Juan, PR 00922-1850 Date(s) debt was incurred 2010 | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Legal services | apply. | | \$240.00 \$240.11 | |
| List in alphabetical order all of the creditors without and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 Last 4 digits of account number 4526 Nonpriority creditor's name and mailing address IVETTE MONTES LEBRON, Esq PO BOX 11850 STE 102 San Juan, PR 00922-1850 Date(s) debt was incurred 2010 Last 4 digits of account number 6956 Nonpriority creditor's name and mailing address Jaime Rodriguez Rivera | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: No Yes As of the petition filing date, the claim is: Check all that Disputed Basis for the claim: Legal services Is the claim subject to offset? No Yes | apply. | | \$240.00 \$240.11 | |
| List in alphabetical order all of the creditors with out and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address: Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 Last 4 digits of account number 4526 Nonpriority creditor's name and mailing address: IVETTE MONTES LEBRON, Esq PO BOX 11850 STE 102 San Juan, PR 00922-1850 Date(s) debt was incurred 2010 Last 4 digits of account number 6956 Nonpriority creditor's name and mailing address: Jaime Rodriguez Rivera 30 Repto Pineiro St | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Unliquidated Disputed Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Disputed Basis for the claim: Legal services Is the claim subject to offset? No Yes | apply. | | \$240.00 \$240.11 | |
| List in alphabetical order all of the creditors without and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address: Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 Last 4 digits of account number 4526 Nonpriority creditor's name and mailing address: IVETTE MONTES LEBRON, Esq PO BOX 11850 STE 102 San Juan, PR 00922-1850 Date(s) debt was incurred 2010 Last 4 digits of account number 6956 Nonpriority creditor's name and mailing address: Jaime Rodriguez Rivera 30 Repto Pineiro St GUAYNABO, PR 00969-5650 | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Unliquidated Disputed Basis for the claim: Legal services Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Contingent Disputed Basis for the claim: Legal services Is the claim subject to offset? No Yes | apply. | | \$240.00 \$240.11 | |
| List in alphabetical order all of the creditors with out and attach the Additional Page of Part 2. Nonpriority creditor's name and mailing address: Andres Rodriguez Burgos 30 Rpto Pineiro GUAYNABO, PR 00969-5650 Date(s) debt was incurred 12/2012 to 1 Last 4 digits of account number 4526 Nonpriority creditor's name and mailing address: IVETTE MONTES LEBRON, Esq PO BOX 11850 STE 102 San Juan, PR 00922-1850 Date(s) debt was incurred 2010 Last 4 digits of account number 6956 Nonpriority creditor's name and mailing address: Jaime Rodriguez Rivera 30 Repto Pineiro St | n nonpriority u | As of the petition filing date, the claim is: Check all that Contingent Unliquidated Basis for the claim: Supplier Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Legal services Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Contingent Unliquidated Disputed Basis for the claim: Legal services Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that Contingent Unliquidated | apply. | | \$240.00 | |
| | Date or dates debt was incurred 2Q/2016 & 3Q/2016 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) Priority creditor's name and mailing address MUNICIPALITY OF GUAYNABO PO BOX 7885 GUAYNABO, PR 00970 Date or dates debt was incurred 2012-2013 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | TRS PO BOX 7346 Philadelphia, PA 19101-7346 Date or dates debt was incurred 2Q/2016 & 3Q/2016 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) Priority creditor's name and mailing address MUNICIPALITY OF GUAYNABO PO BOX 7885 GUAYNABO, PR 00970 Date or dates debt was incurred 2012-2013 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) Check all the Check all the Patent Basis for the Patent Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) No | IRS PO BOX 7346 Philadelphia, PA 19101-7346 Date or dates debt was incurred 2Q/2016 & 3Q/2016 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) Priority creditor's name and mailing address MUNICIPALITY OF GUAYNABO PO BOX 7885 GUAYNABO, PR 00970 Date or dates debt was incurred 2012-2013 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) Specify Code subsection of PRIORITY Unliquidated Disputed Basis for the claim: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Patent Is the claim subject to offset? Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) No | IRS PO BOX 7346 Philadelphia, PA 19101-7346 Date or dates debt was incurred 2Q/2016 & 3Q/2016 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) Priority creditor's name and mailing address MUNICIPALITY OF GUAYNABO PO BOX 7885 GUAYNABO, PR 00970 Date or dates debt was incurred 2012-2013 Last 4 digits of account number 6956 Basis for the claim: 2d & 3d Q Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Date or dates debt was incurred 2012-2013 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) No | IRS PO BOX 7346 Philadelphia, PA 19101-7346 Date or dates debt was incurred 2Q/2016 & 3Q/2016 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) Priority creditor's name and mailing address MUNICIPALITY OF GUAYNABO PO BOX 7885 GUAYNABO, PR 00970 Date or dates debt was incurred 2012-2013 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) Sasis for the claim: 2d & 3d Q Is the claim subject to offset? No Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Date or dates debt was incurred 2012-2013 Last 4 digits of account number 6956 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) No | |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 24 of 58

| Debto | POWER COOLING CONTROLS, INC. | Case number (if known) | |
|-------|--|--|----------------------------|
| 3.4 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$1.00 |
| | JWD ENGINEERING Corp | ☐ Contingent | |
| | PO BOX 3645 | ☐ Unliquidated | |
| | GUAYNABO, PR 00970 Date(s) debt was incurred 2011 | ☐ Disputed | |
| | Last 4 digits of account number 6956 | Basis for the claim: Salaries & Wages Employees of Set off of \$25,241.35 owed to \$81,335.75 or over 90 days & improbable collection Is the claim subject to offset? ☐ No ■ Yes | |
| 3.5 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$10,236.45 |
| 0.0 | MUNICIPALITY OF GUAYNABO | Contingent | Ψ10 , 230.43 |
| | PO BOX 7885 | | |
| | GUAYNABO, PR 00970 | ☐ Unliquidated | |
| | Date(s) debt was incurred 2009-2010 | ☐ Disputed | |
| | 2010-2011 & 2014-2015 | Basis for the claim: Municipal Patents | |
| | Last 4 digits of account number 6956 | Payment Plan \$14,742.49 11/23/2015 PCC will continue payment plan \$409.64 x 300 to conserve Amnesty of entire debt of \$29,70 balance of \$10,236.45 | 6 mos n order 180.23 w/ |
| | | Is the claim subject to offset? ■ No ☐ Yes | |
| 3.6 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$227,529.00 |
| | ORIENTAL BANK | ☐ Contingent | |
| | PO BOX 195115 San Juan, PR 00919-5115 | ☐ Unliquidated | |
| | | Disputed | |
| | Date(s) debt was incurred 2011 | | D 2015 1020 |
| | Last 4 digits of account number 1020 | Basis for the claim: Collection Monies/Judgment DC L of C P \$455,057.99 + Int \$89,870.40 + \$30,000 + \$30,0 | |
| | | Is the claim subject to offset? ■ No ☐ Yes | |
| 3.7 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$1.00 |
| | Oriental f/k/a Eurobank | Contingent | |
| | PO Box 364745 San Juan, PR 00936-4745 | ☐ Unliquidated | |
| | | Disputed | |
| | Date(s) debt was incurred <u>9/21/2007</u> Last 4 digits of account number <u>4554</u> | Basis for the claim: Bo Mamey SR 834 KM 4.7 Vega S Guaynabo Note \$29,327 PAID | t Los Torres |
| | | @ F 11 T 627 FCA# 25,468 Bis | |
| | | Is the claim subject to offset? ■ No ☐ Yes | |
| 3.8 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$600.00 |
| | Refricentro 380 Barbosa Ave | Contingent | |
| | SAN JUAN, PR 00917 | Unliquidated | |
| | Date(s) debt was incurred 2016 | Disputed | |
| | Last 4 digits of account number 6956 | Basis for the claim: <u>Supplier</u> | |
| | | Is the claim subject to offset? ■ No □ Yes | |
| 3.9 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$376.84 |
| | Stericycle Comsol | ☐ Contingent | |
| | 26604 Network Place | ☐ Unliquidated | |
| | CHICAGO, IL 60673-1266 | ☐ Disputed | |
| | Date(s) debt was incurred 10/2016 | Basis for the claim: <u>Supplier</u> | |
| | Last 4 digits of account number _ 5091_ | Is the claim subject to offset? ■ No ☐ Yes | |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 25 of 58

| Debtor POWER Name | COOLING CONTROLS, INC. | Case number (if known) | |
|---------------------|--|---|---|
| | creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$1.00 |
| | er [Eurobank] of \$206,426 | Contingent | 71.00 |
| Note | | ☐ Unliquidated | |
| | /Paid/Disputed Holder | ■ Disputed | |
| | t was incurred 2007 | — · | 1 |
| Last 4 digits | s of account number | Basis for the claim: Hatillo PR prop previously w/R & G in 2001 & Eurobank in 2007 have by PCC in 2011 but not cancelled upon in PCC. PCC suffered a loss of property filost Notes prior to cancellation. | e been paid off nfo & belief of |
| | | Is the claim subject to offset? ■ No □ Yes | |
| | creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$1.00 |
| | er of \$35,000 Note /Paid/Disputed Holder | ☐ Contingent | |
| | t was incurred 8/30/2004 | ☐ Unliquidated | |
| | s of account number 4554 | Disputed | |
| Lust 4 digit | 3 of account number <u>4004</u> | Basis for the claim: <u>Mortgage Note \$35,000 lost</u> as of yet | not cancelled |
| | | Is the claim subject to offset? ■ No □ Yes | |
| 3.12 Nonpriority | creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$1.00 |
| | er/[R&G] Note of \$41,400 | ☐ Contingent | |
| Unknown | /Paid/Disputed Holder | ☐ Unliquidated | |
| Date(s) deb | t was incurred 2001 | ☐ Disputed | |
| Last 4 digits | s of account number | Basis for the claim: Hatillo PR prop previously | mortgaged [2] |
| | | w/ R & G in 2001 & Eurobank in 2007 have | |
| | | by PCC in 2011 but not cancelled upon in | |
| | | PCC. PCC suffered a loss of property for Note lost prior to cancellation | com Pres's car & |
| | | <u>_</u> | |
| | | Is the claim subject to offset? ■ No □ Yes | |
| | creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$1,196.14 |
| Trane P PO Box | | ☐ Contingent | |
| | N, PR 00908-9000 | ☐ Unliquidated | |
| | t was incurred 8/2016 | ☐ Disputed | |
| | s of account number 0040 | Basis for the claim: _Supplier/Critical Vendor_ | |
| · · | | Is the claim subject to offset? ■ No □ Yes | |
| 3.14 Nonpriority | creditor's name and mailing address | As of the petition filing date, the claim is: Check all that apply. | \$149.00 |
| VPNET | orealter 3 flame and flaming address | Contingent | 7149.00 |
| PO Box | 193780 | ☐ Unliquidated | |
| | N, PR 00919-3780 | ☐ Disputed | |
| Date(s) deb | t was incurred <u>11/2016</u> | _ · | |
| Last 4 digits | s of account number <u>5877</u> | Basis for the claim: Supplier | |
| - | | Is the claim subject to offset? ■ No □ Yes | |
| | | | |
| Part 3: List Oth | ners to Be Notified About Unsecured Clair | ns | |
| | I order any others who must be notified for claim ve, and attorneys for unsecured creditors. | ns listed in Parts 1 and 2. Examples of entities that may be listed are col | lection agencies, assignees |
| If no others need t | to be notified for the debts listed in Parts 1 and 2 | e, do not fill out or submit this page. If additional pages are needed, c | opy the next page. |
| Name and n | nailing address | On which line in Part1 or Part 2 is the related creditor (if any) listed? | Last 4 digits of account number, if any |
| | de Diego Collar Esq l Bank / TC Assets Co 79552 | Line <u>3.6</u> | 1020 |
| | a, PR 00984-9552 | Not listed. Explain | |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 26 of 58

| Debtor | POWER COOLING CONTROLS, INC. | Case number (if known) | | |
|--------|--|---|---|--|
| | Name and mailing address | On which line in Part1 or Part 2 is the related creditor (if any) listed? | Last 4 digits of account number, if any | |
| 4.2 | Capital Crossing PR LLC FBO Triangle Cayman Asset Co PO Box 70111 | Line _3.6_ | _ | |
| | SAN JUAN, PR 00936 | Not listed. Explain | | |
| 4.3 | Luis Gerald del Pilar & Ivelisse Rdz 1045 Calle M GUAYNABO, PR 00969 | Line <u>3.12</u> | _ | |
| | GOMMES, IN 00303 | Not listed. Explain | | |
| 4.4 | Wilmer Morales Fonseca Esq. De Diego Law Offices P.S.C. PO Box 79552 | Line _3.6_ | _ | |
| | CAROLINA, PR 00984-9552 | Not listed. Explain | | |
| | | | | |

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 15b. Total claims from Part 2

5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.

| | | | Total of claim amounts |
|-----|---|----|------------------------|
| 5a. | | \$ | 15,697.25_ |
| 5b. | + | \$ | 248,679.54 |
| | | | |
| 50 | | Ф | 264.376.79 |

Case 16-09134-FSI 11 Doc# 1 Filed 11/17/16 Entered 11/17/16 19:02:31 Desc: Main 7:00PM

| Document Page 27 of ! | 58 |
|---|-----------------------|
| Fill in this information to identify the case: | |
| Debtor name POWER COOLING CONTROLS, INC. | |
| United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO | |
| Case number (if known) | ☐ Check if this is an |

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

amended filing

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

- Does the debtor have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.
- Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B: Assets Real and Personal (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired

2.1. State what the contract or lease is for and the nature of the debtor's interest

1 Year Expired September 30, 2017 \$11,293 monthly A/C Systems Maintenance

State the term remaining

1 year

List the contract number of any

135419179 government contract

DHS Customs & Border Protection

CBP Procurement Direct Intech II Ste 100

6650 Telecom Drive INDIANAPOLIS, IN 46278

2.2. State what the contract or lease is for and the nature of

the debtor's interest

3 Month \$460 1/1/2016 to 1/1/2017 every 3

months A/C Systems 2.5 months

State the term remaining

Maintenance

List the contract number of any government contract

HSFE 02-16-P-7002

1 Year 4/1/2015

Federal Emerg Mgmt Agency Caribbean Div Office

PO Box 70105

SAN JUAN, PR 00936

2.3. State what the contract or lease is for and the nature of the debtor's interest

from year to year until terminated \$2,340 monthly A/C Systems Maintenance

State the term remaining

Continuing

List the contract number of any

034-023 R government contract

Island Wide Rental

PO Box 11670

SAN JUAN, PR 00922-1670

2.4. State what the contract or lease is for and the nature of the debtor's interest

7/1/2016 to 12/31/2016 \$2,612 montly

A/C Systems Maintenance

State the term remaining

FEMA

List the contract number of any government contract

660-42-7034

MUNICIPALY OF SAN JUAN

PO Box 70179

SAN JUAN, PR 00936-8179

Official Form 206G

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document

Debtor 1 POWER COOLING CONTROLS, INC. First Name Middle Name

Page 28 of 58

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest

1 Multi Year \$385 monthly A/C Systems Maintenance

State the term remaining

Continuous

List the contract number of any government contract

Suchville Plaza Hnos Olzabal PO Box 2926 BAYAMON, PR 00959 Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 29 of 58

| Document Fage 29 of 30 | |
|---|--------------------------------------|
| Fill in this information to identify the case: | |
| Debtor name POWER COOLING CONTROLS, INC. | |
| United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO | |
| Case number (if known) | ☐ Check if this is an amended filing |
| Official Form 206H | |
| Schedule H: Your Codebtors | 12/15 |
| | |

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

- 1. Do you have any codebtors?
- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- Yes
- 2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.
 Column 1: Codebtor
 Column 2: Creditor

| | Name | Mailing Address | Name | Check all schedules that apply: |
|-----|--|--|--|---------------------------------|
| 2.1 | David del Pilar Muñoz | Terrazas de Guaynabo C22 Calle Violeta GUAYNABO, PR 00969 | ORIENTAL BANK | □ D ■ E/F3.6 □ G |
| 2.2 | Luis Geraldo del Pilar & Ivelisse Rodg | Urb Munoz Rivera #1045 Calle M GUAYNABO, PR 00969 Title Holder but equitable ownership lies in PCC | To Holder [Eurobank] of \$206,426 Note | □ D ■ E/F3.10 □ G |
| 2.3 | Wiliam del Pilar Muñoz | Suite 102 PO Box 11850 SAN JUAN, PR 00922 | ORIENTAL BANK | □ D ■ E/F3.6 □ G |
| 2.4 | William del Pilar Muñoz | Ste 102 PO Box 11850 SAN JUAN, PR 00922 | To Holder of \$35,000 Note | □ D ■ E/F3.11 □ G |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 30 of 58

| - | Il in this information to identify the case: | | | | |
|--------|--|-------------------------------------|--|------------|---|
| | ebtor name POWER COOLING CONTROLS, INC. | | | | |
| | nited States Bankruptcy Court for the: DISTRICT OF PUERTO RI | ICO | | | |
| | ase number (if known) | | | | |
| 06 | ise number (ir known) | | | | Check if this is an amended filing |
| \sim | fficial Farms 207 | | | | |
| | fficial Form 207 atement of Financial Affairs for Non-In | dividua | s Filing for Ran | kruntov | 04/16 |
| The | e debtor must answer every question. If more space is needed te the debtor's name and case number (if known). | | | | |
| Pa | rt 1: Income | | | | |
| 1. | Gross revenue from business | | | | |
| | □ None. | | | | |
| | Identify the beginning and ending dates of the debtor's fisca which may be a calendar year | | Sources of revenue Check all that apply | | Gross revenue (before deductions and exclusions) |
| | From the beginning of the fiscal year to f | filing | ■ Operating a business | | \$179,843.47 |
| | date: From 10/01/2016 to Filing Date | | Other | | |
| | For prior year: From 10/01/2015 to 9/30/2016 | | ■ Operating a business | | \$-486,044.00 |
| | 110111107017201310 373072010 | | Other | | |
| | For year before that: From 10/01/2014 to 9/30/2015 | | ■ Operating a business | | \$-399,993.00 |
| | | | ☐ Other | | |
| | Non-business revenue Include revenue regardless of whether that revenue is taxable. No lawsuits, and royalties. List each source and the gross revenue for | | | | |
| | ■ None. | | | | |
| | | | Description of sources of | revenue | Gross revenue from each source (before deductions and exclusions) |
| Pa | rt 2: List Certain Transfers Made Before Filing for Bankrupt | tcy | | | |
| | Certain payments or transfers to creditors within 90 days before List payments or transfers—including expense reimbursements—to filing this case unless the aggregate value of all property transferre and every 3 years after that with respect to cases filed on or after the content of the cont | o any creditor, red to that cred | other than regular employe ditor is less than \$6,425. (The | | |
| | ☐ None. | | | | |
| | Creditor's Name and Address Dates | s | Total amount of value | Reasons fo | r payment or transfer |

Official Form 207

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

Document Page 31 of 58

Debtor POWER COOLING CONTROLS, INC.

Document Page 31 of 58
Case number (if known)

| Creditor's Name and Address | Dates | Total amount of value | Reasons for payment or transfer Check all that apply |
|---|-----------------------------|-----------------------|--|
| 3.1. ORIENTAL GROUP PO BOX 195115 SAN JUAN, PR 00918-5115 | 8/2016 9/2016 10/2016 | \$1,498.66 | ■ Secured debt Unsecured loan repayments Suppliers or vendors Services Other |

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

■ None.

| | der's name and address tionship to debtor | Dates | Total amount of value | Reasons for payment or transfer |
|------|---|---------------------|-----------------------|---------------------------------|
| 4.1. | William del Pilar PO Box 11850 SAN JUAN, PR 00922 President | 8/2015 to 8/2016 | \$16,597.77 | Salary |
| 4.2. | David del Pilar Terrzas de Guaynabo Calle Violeta GUAYNABO, PR 00968 Secretary/Treasurer of PCC Inc | 8/2015 to 8/2016 | \$21,144.60 | Salary |
| 4.3. | Leonardo del Pilar Villas de San Agustin G9 Calle 6 BAYAMON, PR 00959 Employee Son | 8/2016 to 8/2016 | \$14,203.21 | Salary |

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

| Creditor's name and address | Describe of the Property | Date | Value of property |
|-----------------------------|--------------------------|------|-------------------|
|-----------------------------|--------------------------|------|-------------------|

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

| Creditor's name and address | Description of the action creditor took | Date action was taken | Amount |
|--|--|-----------------------|-------------|
| JWD ENGINEERING Corp. PO BOX 3645 GUAYNABO, PR 00970 | Mutual debt owed between JWD & PCC have been set off completely Last 4 digits of account number: | 11/1/2016 | \$81,335.75 |

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

Case:16-09134-ESL11 Doc#:1_Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Page 32 of 58 Document

Debtor POWER COOLING CONTROLS, INC Case number (if known)

| | ☐ No | one. | | | | |
|--------------|--------|---|---|--------------------------------|--------------------------|--------------------------|
| | | Case title Case number | Nature of case | Court or agency's name address | and Status of | case |
| | 7.1. | Oriental Bank a/k/a Triangle Triangle Cayman Assets Co. vs Power Cooling Controls Inc. et als DCD 2015-1020 (502) | Collection of Monies Judgment dated 10/5/16 e.o.d. 10/18/16 Not yet final | Bayamon Bayamon, PR | ■ Pendii □ On ap □ Concl | peal |
| L | ist an | nments and receivership y property in the hands of an assignee ver, custodian, or other court-appointe | | | ling this case and any p | property in the hands of |
| | ■ No | one | | | | |
| Part | 4: | Certain Gifts and Charitable Contri | butions | | | |
| | | gifts or charitable contributions the ts to that recipient is less than \$1,00 | | nt within 2 years before fili | ng this case unless th | ne aggregate value of |
| | ■ No | one | | | | |
| | | Recipient's name and address | Description of the gift | s or contributions | Dates given | Value |
| Part | 5: | Certain Losses | | | | |
| 10. A | II los | ses from fire, theft, or other casualt | y within 1 year before filin | g this case. | | |
| | □ No | one | | | | |
| | | cription of the property lost and the loss occurred | Amount of payments r If you have received payme example, from insurance, g | | Dates of loss | Value of property lost |

Part 6: Certain Payments or Transfers

Theft on 2 ocassions from

car w/ files & documentation

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filling of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

9/23/2014 &

7/8/2016

tort liability, list the total received.

None

■ None.

Unknown

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 33 of 58

Debtor POWER COOLING CONTROLS, INC.

Case number (# known)

Who was paid or who received If not money, describe any property transferred **Dates** Total amount or the transfer? value **Address** 11.1. L.A. MORALES & ASSOCIATES P.S.C. URB VILLA BLANCA 11/15/201 76 AQUAMARINA Attorney Fees & Expenses \$14,000.00 6 Caguas, PR 00725-1908

Email or website address

[\$4,000]

lamoraleslawoffice@gmail.com

Who made the payment, if not debtor? Partially paid by officers

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None.

Name of trust or device Describe any property transferred Dates transfers were made Value

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None.

Who received transfer?

Address

Description of property transferred or payments received or debts paid in exchange

Date transfer

Was made

Total amount or was made

value

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

□ Does not apply

| | Address | Dates of occupancy From-To |
|-------|--|----------------------------|
| 14.1. | Sector La Apama Calle Apama Esq Dos Pinos GUAYNABO, PR 00969 | 2000-11/2012 |

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?
- No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides and housing, number of patients in debtor's care

Document Page 34 of 58 POWER COOLING CONTROLS Debtor TNC Case number (if known) Part 9: Personally Identifiable Information 16. Does the debtor collect and retain personally identifiable information of customers? No. Yes. State the nature of the information collected and retained. 17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit? No. Go to Part 10. Yes. Does the debtor serve as plan administrator? Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units 18. Closed financial accounts Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions. ■ None Financial Institution name and Last 4 digits of Type of account or Last balance Date account was **Address** account number instrument closed, sold, before closing or moved, or transfer transferred 18.1. BANCO POPULAR 2016 \$8,000.00 **XXXX-**0211 Checking GPO BOX 3228 ☐ Savings San Juan, PR 00936 ■ Money Market □ Brokerage □ Other 19. Safe deposit boxes List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case. None Depository institution name and address Names of anyone with Description of the contents Do you still access to it have it? Address 20. Off-premises storage List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business. None Facility name and address Names of anyone with Description of the contents Do you still have it? access to it Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own 21. Property held for another List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property. ☐ None

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31

Desc: Main

11/17/16 7:00PM

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 35 of 58

Case number (if known)

Debtor POWER COOLING CONTROLS, INC.

Owner's name and address Location of the property Describe the property Value David del Pilar PCC Inc 2000 Chevrolet Venture \$500.00 SR 834 Km 4.7 Terrazas de Guaynabo C 22 Calle Violeta Sector Islenas Mamey GUAYNABO, PR 00969 Ward GUAYNABO, PR 00970 Owner's name and address Location of the property Describe the property Value Leonardo del Pilar PCC Inc 1994 Isuzu Trooper \$1,700.00 Urb San Agustin SR 834 Km 4.7 1970 3 Wheel Trailer G 9 Calle 6 Sector Villa Islena Tools BAYAMON, PR 00959 Mamey Ward GUAYNABO, PR 00970 Owner's name and address Location of the property Describe the property Value Van 40' with tools Jesus Rodriguez PCC Inc \$9,000.00 SR 834 Km 4.7 Urb Sta Juanita AHU Machinery H 16 Calle Visalia Sector Villa Islena BAYAMON, PR 00956 Mamey Ward GUAYNABO, PR 00970

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

| 22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders No. Yes. Provide details below. Case title Case number Court or agency name and address Status of case address 23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law? No. Yes. Provide details below. Site name and address Governmental unit name and address Governmental unit name and address Environmental law, if known Date of notice address No. Yes Provide details below. | ιτορ | ort all flotices, releases, and proceedings known | i, regardless of when they occur | cu. | | |
|---|------|--|------------------------------------|--|----------------|--|
| Yes. Provide details below. Case title Case number Court or agency name and address Status of case address 23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law? No. Yes. Provide details below. Site name and address Governmental unit name and address Environmental law, if known Date of notice address 24. Has the debtor notified any governmental unit of any release of hazardous material? | 22. | as the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and order | | | | |
| Case title Case number Court or agency name and address Status of case 23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law? No. Yes. Provide details below. Site name and address Governmental unit name and address Governmental unit name and address Environmental law, if known Date of notice address 24. Has the debtor notified any governmental unit of any release of hazardous material? | | - - | | | | |
| Case number address 23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law? No. Yes. Provide details below. Site name and address Governmental unit name and address Environmental law, if known Date of notice address 24. Has the debtor notified any governmental unit of any release of hazardous material? No. | | Yes. Provide details below. | | | | |
| environmental law? ■ No. □ Yes. Provide details below. Site name and address Governmental unit name and address Environmental law, if known Date of notice address 24. Has the debtor notified any governmental unit of any release of hazardous material? ■ No. | | | U J | Nature of the case | Status of case | |
| Yes. Provide details below. Site name and address Governmental unit name and address Environmental law, if known Date of notice address 24. Has the debtor notified any governmental unit of any release of hazardous material? No. | | environmental law? | e debtor that the debtor may be li | able or potentially liable under or in v | iolation of an | |
| Site name and address Governmental unit name and address Environmental law, if known Date of notice address 24. Has the debtor notified any governmental unit of any release of hazardous material? No. | | No. | | | | |
| address 24. Has the debtor notified any governmental unit of any release of hazardous material? No. | | Yes. Provide details below. | | | | |
| ■ No. | | Site name and address | | Environmental law, if known | Date of notice | |
| | 24. | Has the debtor notified any governmental unit of | any release of hazardous materia | al? | | |
| ☐ Yes Provide details below | | ■ No. | | | | |
| | | ☐ Yes. Provide details below. | | | | |

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

Governmental unit name and

address

Site name and address

Date of notice

Environmental law, if known

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

Document Page 36 of 58

| Debtor P | OWER COOLING CONTROLS, | INC. | age 30 or Ca | ase number (if known) | | |
|--------------------------|---|--------------------------------|---|---|---|---|
| _ | , | | | , , | | |
| ■ None | ۵ | | | | | |
| INOH | e | | | | | |
| Business | s name address | Describe the nature of the | e business | Employer Identification IDO not include Social Security | | |
| | | | | Dates business existed | | |
| | records, and financial statements all accountants and bookkeepers w | | oke and records | s within 2 years before filing th | is casa | |
| | None | The maintained the debtor 3 bo | oks and records | s within 2 years before himly th | is case. | |
| Name | and address | | | | Date of service From-To | |
| 26a.1. | Rafael Fernandez Torr PMB 265 Box 7004 VEGA BAJA, PR 00694-7 | | | | 2000 to present | |
| | all firms or individuals who have au in 2 years before filing this case. | dited, compiled, or reviewed d | ebtor's books of | f account and records or prepare | ared a financial statement | |
| 1 | None | | | | | |
| Name | and address | | | | Date of service From-To | |
| 26b.1. | Rafael Fernandez Torr PMB 265 PO Box 7004 VEGA BAJA, PR 00694-7 | | | | Not audited las 2 years | t |
| 26c List | 6c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed. | | | | | |
| | | possession of the debtor's bot | ns of account a | ind records when this case is | ileu. | |
| ■ 1 | None | | | | | |
| Name | | | If any books of account a unavailable, explain why | y books of account and records are vailable, explain why | | |
| | 6d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case. | | | | | |
| 1 | None | | | | | |
| Name | and address | | | | | |
| 26d.1. | ORIENTAL BANK PO BOX 195115 | 1.5 | | | | |
| | San Juan, PR 00919-51 | 15 | | | | _ |
| 27. Inventor Have any | ies y inventories of the debtor's property | y been taken within 2 years be | fore filing this ca | ase? | | |
| □ No |) | | | | | |
| ■ Ye | es. Give the details about the two mo | ost recent inventories. | | | | |
| i | Name of the person who supervisinventory | sed the taking of the | Date of inver | ntory The dollar amount or other basis) of e | and basis (cost, market, each inventory | , |
| 27.1 | William del Pilar Muñoz | | | | | |

Name and address of the person who has possession of inventory records

Power Cooling Controls Inc.

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

11/01/2016

See Schedules

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 37 of 58

Debtor POWER COOLING CONTROLS, INC.

Case number (# known)

| Name | Address | Position and nature of any interest | % of interest, if any |
|----------------------------|--|-------------------------------------|-----------------------|
| William del Pilar Muñoz | PO Box 192817 SAN JUAN, PR 00919-2817 | President | 50% |
| | | | |
| Name | Address | Position and nature of any interest | % of interest, if any |

| 29. | Within 1 | 1 year | before t | he filing | of this case | did the | debtor hav | e officers, | directors, | managing | members, | general | partners, | members i | in |
|-----|----------|--------|-----------|-----------|--------------|-----------|------------|-------------|------------|-----------|----------|---------|-----------|-----------|----|
| | control | of the | e debtor. | or share | holders in c | ontrol of | the debto | r who no le | onaer hold | these pos | itions? | | | | |

| No |
|----|
|----|

Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

■ No

Yes. Identify below.

| | Name and address of recipient | Amount of money or description and value of property | Dates | Reason for providing the value |
|------|---|---|--|--------------------------------|
| 30.1 | William del Pilar Muñoz PO Box 192817 SAN JUAN, PR 00919-2817 | \$16,597.77 as of 9/30/2016 \$2,550 car allowance is owed as of 9/15/2016 | 2016 until 9/30/2016 2016 until 9/15/2016 car allowance | Salaried employee |
| | Relationship to debtor Officer/Employee | | | |
| 30.2 | David del Pilar Muñoz Terrazas de Guaynabo 24 Calle Violeta GUAYNABO, PR 00970 | \$21,144.60 as of 8/30/2016 Is owed car allowance \$1,150 as of 9/15/2016 | 8/2015 until 8/30/2016 Since 6/2016 Car allowance | Salaried employee |
| | Relationship to debtor Brother to Pres & Secretary/Treasurer | | | |
| 30.3 | Leonardo del Pilar PR | 8/2015 to 9/30/2016 \$14,203.21 | 8/2015 until 8/30/2016 | Salaried employee |
| | Relationship to debtor Son of President | | | |

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No

☐ Yes. Identify below.

Page 38 of 58 Document POWER COOLING CONTROLS, Debtor INC Case number (if known) Name of the parent corporation Employer Identification number of the parent corporation 32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund? No ☐ Yes. Identify below. Name of the parent corporation Employer Identification number of the parent corporation Part 14: Signature and Declaration WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud 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. I have examined the information in this Statement of Financial Affairs and any attachments 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. November 17, 2016 Executed on

William del Pilar Muñoz

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31

Are additional pages to Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207) attached?

Printed name

No

☐ Yes

/s/ William del Pilar Muñoz

Signature of individual signing on behalf of the debtor

Position or relationship to debtor President

Desc: Main

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Page 39 of 58 Document

B2030 (Form 2030) (12/15)

2.

7.

United States Bankruptcy Court District of Puerto Rico

| In 1 | re | POWER COOLING CONTROLS, INC. | | Case No. | | |
|------|----------------|--|---|--|----------------------|---------------------|
| | - | Debtor | (s) | Chapter | 11 | |
| | | DISCLOSURE OF COMPENSATION OF | F ATTORNE | Y FOR DI | EBTOR(S) | |
| 1. | con | suant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I nepensation paid to me within one year before the filing of the petition in rendered on behalf of the debtor(s) in contemplation of or in connection | bankruptcy, or ag | reed to be paid | l to me, for service | |
| | | 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 | | | 14,000.00 | |
| | | The undersigned shall bill against the retainer at an hourly rate of [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all fees and expenses exceeding the amount of the retainer. | Court approved | \$ | 275.00 | |
| 2. | \$ | 1,721.00 of the filing fee has been paid. | | | | |
| 3. | The | e 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 unles | s they are mem | bers and associa | tes of my law firm. |
| | | I have agreed to share the above-disclosed compensation with a person copy of the agreement, together with a list of the names of the people s | | | | my law firm. A |
| 6. | In | return for the above-disclosed fee, I have agreed to render legal service | for all aspects of th | ne bankruptcy | case, including: | |
| | b. c. d. | Analysis of the debtor's financial situation, and rendering advice to the Preparation and filing of any petition, schedules, statement of affairs an Representation of the debtor at the meeting of creditors and confirmation Representation of the debtor in adversary proceedings and other contest [Other provisions as needed] Representation of the debtors in any dischar relief from stay actions or any other advers reorganization of Small Business. | d plan which may on hearing, and any ted bankruptcy man geability ac | be required; adjourned heaters; tions, jud | arings thereof; | avoidances, |

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

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 40 of 58

| In re | POWER COOLING CONTROLS, INC. | Case No. | |
|-------|------------------------------|----------|--|
| | Debtor(s) | | |

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

| CERTIFICATION | | | | | | | |
|--|--|--|--|--|--|--|--|
| I certify that the foregoing is a complete state this bankruptcy proceeding. | ement of any agreement or arrangement for payment to me for representation of the debtor(s) in | | | | | | |
| November 17, 2016 | /s/ Lyssette A Morales Vidal | | | | | | |
| Date | Lyssette A Morales Vidal 120011 | | | | | | |
| | Signature of Attorney | | | | | | |
| | L.A. MORALES & ASSOCIATES P.S.C. | | | | | | |
| | URB VILLA BLANCA | | | | | | |
| | 76 AQUAMARINA | | | | | | |
| | Caguas, PR 00725-1908 | | | | | | |
| | 787-746-2434 | | | | | | |
| | lamoraleslawoffice@gmail.com | | | | | | |
| | Name of law firm | | | | | | |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 41 of 58

United States Bankruptcy Court District of Puerto Rico

| in re POWER COOLING CONTROLS, INC. | | | Case No. | |
|--|---------------------|---------------------------|---------------|----------------------------------|
| | De | ebtor(s) | Chapter | 11 |
| LIST OI | F EQUITY SE | CURITY HOLDER | AS. | |
| Following is the list of the Debtor's equity security holder | rs which is prepare | d in accordance with rule | 1007(a)(3) fo | r filing in this Chapter 11 Case |
| Name and last known address or place of business of holder | ecurity Class | Number of Securities | s K | ind of Interest |
| -NONE- | | | | |
| DECLARATION UNDER PENALTY OF P | ERJURY ON | BEHALF OF COR | PORATIO | N OR PARTNERSHIP |
| I, the President of the corporation na | med as the debt | tor in this case, declar | re under pei | nalty of perjury that I have |

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

Signature /s/ William del Pilar Muñoz

William del Pilar Muñoz

read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date November 17, 2016

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 42 of 58

United States Bankruptcy Court District of Puerto Rico

| In re | POWER COOLING CONTROLS, IN | IC. | Case No. | |
|-------|---|---|------------------|------------------------------------|
| | | Debtor(s) | Chapter | 11 |
| | VERIF | FICATION OF CREDITOR M | IATRIX | |
| | resident of the corporation named as of my knowledge. | the debtor in this case, hereby verify that the | attached list of | f creditors is true and correct to |
| | | | | |
| Date: | November 17, 2016 | /s/ William del Pilar Muño | OZ | |
| | | William del Pilar Muñoz/Pr Signer/Title | resident | |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 43 of 58

Formulario 941-PR para 2016: Planilla para la Declaración Federal TRIMESTRAL del Patrono

| Mānas | | Treasury — Internal Revenue Ser | VICE: | | OMB No. 1545-002 |
|---------------------------|---|--|---|--|--|
| Muner | o de identificación patronal (EIN) 6 | - 0 5 8 | 6 9 5 | 6 Informe | e para este trimestre de 2016. e uno). |
| Nomb | re (el de usted, no el de su negocio) | | | 1: | enero, febrero, marzo |
| Nomb | re comercial (si alguno) POWERCO | OLING & CONTROLS, I | NC | 2: | abril, mayo, junio |
| | ,, 4, 1, | | | X 3: | julio, agosto, septiembre |
| Direct | | | | | octubre, noviembre, diciembre |
| | Número Celle | | lúmero de oficina o de | Puede end | contrar instrucciones y formularios de años |
| | SAN JUAN Gluded | PR | Código pestal | | en www.irs.gov/torm941pr, |
| | | CSTORY | Coorgo posial | 1617 | |
| | Nombre del pala extranjero | Provincia extranjera/condado | Cödigo postal extr | ranjero | |
| on los | s instrucciones por separado antes d | L DOMESTIC TO THE SECOND TO THE SECOND | | | All the second s |
| 1004040 | Section 4 to a constitution of a section of the first of | SAREST BRESKI 1991 - 2-54 (55 to 145 52) | LYMEN ANSWERS | maquiniia o en ietra o | e moide dentro de los encasiliados. |
| Parte | 1: Conteste las preguntas a Número de empleados que re | and the second section of the second section in the second section is a second section of the second | CONTRACTOR OF THE PARTY OF THE | emuneraciones | |
| | durante el período de pago qu (2do trimestre), 12 de septiembr | e incluye: el 12 de marz | o (1er trimestre | e), 12 de junio | 6 |
| 2 | HOLDER TO BE THE REAL PROPERTY. | | AND PARTY. | No. of State | THE RESERVE AND A STREET |
| 3 | WHITE PERSONS | A POST OF THE PARTY OF THE PART | TO SHOW | No. of the little of | |
| 4 | Si los salarios, propinas y otras | ramunaraalanan na astá | n evietee e lee | contribuciones al | CAMALIZABLE SALES AND |
| 4 | Seguro Social y al Medicare | | ii sujetos a tas | · · · · · · [| Marque aquí y pase a la línea 6 |
| 5a | Salarios sujetos a la | Columna 1 | 20 90 | Columna 2 | |
| | contribución al Seguro Social | 38,476 . 3 | 2 × .124 = | 4,771 . 0 | 6 |
| | Propinas sujetas a la | | | | |
| 5b | | | Towar I | 0 | 1 |
| 5b 5c | contribución al Seguro Social |) • (| x .124 = | 0. | |
| 5c | contribución al Seguro Social Salarios y propinas sujetos a la contribución al <i>Medicare</i> | 38,476 . 3 | | 0. 1,115. 8 | 1 |
| 18500 | contribución al Seguro Social Salarios y propinas sujetos a la contribución al <i>Medicare</i> Salarios y propinas sujetos a la retención de la Contribución | | 2 × .029 = | 1,115 . 8 | 1 |
| 5c | contribución al Seguro Social Salarios y propinas sujetos a la contribución al <i>Medicare</i> Salarios y propinas sujetos a la | 38,476 . 3 | | 300,000 |] |
| 5c | contribución al Seguro Social Salarios y propinas sujetos a la contribución al <i>Medicare</i> Salarios y propinas sujetos a la retención de la Contribución | A STATE OF THE STA | 2 × .029 = | 1,115 . 8 |] |
| 5c 5d | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago | 5a, 5b, 5c y 5d conforme a la sección 31: | 2 × .029 = | 1,115 . 8 0 . | 5,886. 8 |
| 5c 5d 5e | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas | 5a, 5b, 5c y 5d conforme a la sección 31: | 2 × .029 = | 1,115 . 8 0 . | 5,886. 8 |
| 5c 5d 5e | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago | 5a, 5b, 5c y 5d conforme a la sección 31: las instrucciones) | 2 × .029 = × .009 = 21(q): Contribute | 1,115 . 8 0 . 5e | 5,886. 8 |
| 5c 5d 5e 5f | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago por propinas no declaradas (vea | 5a, 5b, 5c y 5d | 2 × .029 = × .009 = 21(q): Contribute | 0 5e ción adeudada | 5,886. 8 |
| 5c 5d 5e 5f | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago por propinas no declaradas (vea | 5a, 5b, 5c y 5d conforme a la sección 31: las instrucciones) e ajustes. Sume las líneas suos del trimestre actual | 2 × .029 = × .009 = 21(q): Contribut | 1,115 <u>8</u> 0 <u>*</u> 5e ción adeudada 5f | 5,886. 8 |
| 5c 5d 5e 5f 6 | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las lineas Notificación y solicitud de pago por propinas no declaradas (vea Total de contribuciones antes de Ajustes por fracciones de centa Ajustes por compensación por el Ajustes por propinas y por segu | conforme a la sección 31: las instrucciones) | 2 × .029 = × .009 = 21(q): Contribute 5e y 5f | 1,115 _ 8 0 5e ción adeudada 5f 6 7 8 ijo del | 5,886 . 8° 0 |
| 5c 5d 5e 5f 6 7 8 9 | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago por propinas no declaradas (vea Total de contribuciones antes d Ajustes por fracciones de centa Ajustes por compensación por e Ajustes por propinas y por segu trimestre actual | conforme a la sección 31: las instrucciones) e ajustes. Sume las líneas s vos del trimestre actual enfermedad del trimestre ro temporal de vida colec | 2 × .029 = × .009 = 21(q): Contribute 5e y 5f | 1,115 . 8 0 . 5e ción adeudada | 5,886 . 8 0 . 5,886 . 8 0 . 1 0 . |
| 5c 5d 5e 5f 6 7 8 9 10 | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago por propinas no declaradas (vea Total de contribuciones antes de Ajustes por fracciones de centa Ajustes por compensación por el Ajustes por propinas y por segu trimestre actual Total de contribuciones después | conforme a la sección 31: las instrucciones) e ajustes. Sume las líneas succiones del trimestre actual enfermedad del trimestre ro temporal de vida colecta de considerar los ajustes de considerar los ajustes | 2 × .029 = x .009 = 21(q): Contribute 5e y 5f | 1,115 . 8 0 . 5e ción adeudada | 5,886 . 8 0 . 5,886 . 8 0 . 1 0 . |
| 5c 5d 5e 5f 6 7 8 9 | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago por propinas no declaradas (vea Total de contribuciones antes d Ajustes por fracciones de centa Ajustes por compensación por e Ajustes por propinas y por segu trimestre actual | conforme a la sección 31: las instrucciones) e ajustes. Sume las lineas successor del trimestre actual enfermedad del trimestre ro temporal de vida colectiones de considerar los ajuste rimestre, incluyendo toda | 2 × .029 = x .009 = 21(q): Contribute 5e y 5f | 1,115 . 8 0 . 5e ción adeudada | 5,886 . 8 0 . 5,886 . 8 0 . 1 0 . 0 . 1 5,886 . 7 |
| 5c 5d 5e 5f 6 7 8 9 10 | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago por propinas no declaradas (vea Total de contribuciones antes de Ajustes por fracciones de centa Ajustes por compensación por el Ajustes por propinas y por segu trimestre actual Total de contribuciones después | conforme a la sección 31: las instrucciones) e ajustes. Sume las líneas successor del trimestre actual enfermedad del trimestre ro temporal de vida colectiones de considerar los ajuste rimestre, incluyendo toda ior, y toda cantidad pag | 2 × .029 = x .009 = 21(q): Contribute 5e y 5f | 1,115 . 8 0 . 5e ción adeudada | 5,886 . 8 0 . 5,886 . 8 0 . 11 0 . 0 . 12 5,886 . 7 |
| 5c 5d 5e 5f 6 7 8 9 10 | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago por propinas no declaradas (vea Total de contribuciones antes de Ajustes por fracciones de centa Ajustes por compensación por el Ajustes por propinas y por segu trimestre actual Total de contribuciones después Total de depósitos para este traplicada de un trimestre anter | conforme a la sección 31: las instrucciones) | 2 × .029 = × .009 = 21(q): Contribute 5e y 5f | 1,115 . 8 0 . 5e ción adeudada | 5,886 . 8 0 . 5,886 . 8 0 . 1 0 . 0 . 1 5,886 . 7 |
| 5c 5d 5e 5f 6 7 8 9 10 11 | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las lineas Notificación y solicitud de pago por propinas no declaradas (vea Total de contribuciones antes de Ajustes por fracciones de centa Ajustes por compensación por el Ajustes por propinas y por segu trimestre actual Total de contribuciones despuér Total de depósitos para este traplicada de un trimestre anter Formulario 941-X (PR), 941-X, 94 | conforme a la sección 31: las instrucciones) | 2 × .029 = x .009 = 21(q): Contribute 5e y 5f | 1,115 . 8 0 . 5e ción adeudada | 5,886 . 8 0 . 5,886 . 8 0 . 1 0 . 0 . 1 5,886 . 7 |
| 5c 5d 5e 5f 6 7 8 9 10 11 | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago por propinas no declaradas (vea Total de contribuciones antes de Ajustes por fracciones de centa Ajustes por compensación por el Ajustes por propinas y por segu trimestre actual Total de contribuciones después Total de depósitos para este traplicada de un trimestre anter Formulario 941-X (PR), 941-X, 94 Saldo adeudado. Si la línea 10 instrucciones Contribución pagada en exceso | conforme a la sección 31: las instrucciones). e ajustes. Sume las lineas succión 31: las instrucciones). e ajustes. Sume las lineas succión 31: la conformedad del trimestre actual enfermedad del trimestre ro temporal de vida colection, y toda cantidad paga 4-X (SP) o 944-X radicado es mayor que la linea 11. | 2 × .029 = x .009 = 21(q): Contribut 5e y 5f actual tivo a término f cantidad paginada en excesion en el trimestre anote la diferent | 1,115 8 0 s 0 s 5e ción adeudada 5f 6 7 8 ijo del 9 ineas 6 a 9 10 ada en exceso o aplicada del e en curso 11 encia y vea las | 5,886 . 8 0 . 5,886 . 8 0 . 11 0 . 5,886 . 7 5,886 . 7 5,886 . 8 |
| 5c 5d 5e 5f 6 7 8 9 10 11 | contribución al Seguro Social Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas Notificación y solicitud de pago por propinas no declaradas (vea Total de contribuciones antes de Ajustes por fracciones de centa Ajustes por compensación por el Ajustes por propinas y por segu trimestre actual Total de contribuciones después Total de depósitos para este traplicada de un trimestre anter Formulario 941-X (PR), 941-X, 94 Saldo adeudado. Si la línea 10 instrucciones | conforme a la sección 31: las instrucciones). e ajustes. Sume las lineas succión 31: las instrucciones). e ajustes. Sume las lineas succión 31: la conformedad del trimestre actual enfermedad del trimestre ro temporal de vida colection, y toda cantidad paga 4-X (SP) o 944-X radicado es mayor que la linea 11. | 2 × .029 = x .009 = 21(q): Contribut 5e y 5f actual tivo a término f cantidad paginada en excesion en el trimestre anote la diferent | 1,115 . 8 0 . 5e ción adeudada - 5f - 6 - 7 - 8 ijo del - 9 ineas 6 a 9 . 10 ada en exceso o aplicada del e en curso . 11 encia y vea las | 5,886 . 8 0 . 5,886 . 8 0 . 11 0 . 5,886 . 7 5,886 . 7 5,886 . 8 |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 44 of 58 Numbre (el de usted, no el de su regocio) Número de Identificación patronal (EIN)

| ombre (e) de usted, no el de s | | | | Número de ide | ntificación patronal (EIN) | | |
|--|--|--|--|--|--|--|--|
| owercooling & Control | And the second s | | 981 | 1 | 66-0586956 | | |
| | sobre su itinerario de de | | | | | | |
| Si no está seguro de s | si es depositante de itiner | ario mensual o c | le itinerario bisemana | il, vea el aparta | ndo 11 de la Pub. 179. | | |
| 4 Marque uno: | depositar \$100,000 el próximo día durante el trimestre en curso. Si pero la línea 10 de la planilla en curso es \$100,000 o más, usted tiene des depositante de itinerario mensual, complete el itinerario de depósito bisemanal, adjunte el Anexo B (Formulario 941-PR). Pase a la Parte 3. X Era depositante de Itinerario mensual para todo el trimestre, Anote | | | la linea 10 del trimestre anterior era menos de \$2,500 que proveer un registro de su obligación contributiva, s s, a continuación; si es depositante de itinerario | | | |
| | contributiva para el trimestre Obligación contributiva: | Mes 1 | 2,890 | . 72 | | | |
| | 90:50 2 03450005000000000 | Mes 2 | 1.962 | | | | |
| | | | - 1600 | 0 000 | | | |
| | | Mes 3 | 1,033 | | | | |
| - | Total para el | | 5,886 | Li total | l tiene que ser igual a la linea 10. | | |
| | Era depositante de itinerar 941-PR): Registro de la Obli | io bisemanal dura gación Contributiva | nte cualquier parte de e para los Depositantes de | ste trimestre. Co Itinerario Bisema | mplete él Anexo B (Formulario nal, y adjúntelo al Formulario 941-F | | |
| rte 3: Infórmenos | sobre su negocio. Si cu | alguiera de las | preguntas NO corre | snonde a su n | egocio, déjela en blanco. | | |
| 0.915 | Mark to the Mark the | 200 with 12 m | 2.04.70 | sponde a su n | | | |
| Si su negocio ha o | dejado de operar o si uste | d ha dejado de i | pagar salarios | | . Marque aquí y | | |
| anote la última feci | na en la que pagó salarios | 11 | T. | | | | |
| | acional y no tiene que radi | ane planillas nos | a aada trimaatus dal | | . Marque aquí. | | |
| | | 22 | | ano | . Iviarque aqui. | | |
| rte 41 ¿Podemos o | comunicarnos con su ter | cero autorizad | 0? | | | | |
| Si. Nombre y n teléfono del designado Seleccione | | n personal (PIN) o | de 5 digitos que usará | al hablar con el | IRS. | | |
| | | | | | | | |
| The state of the s | TIENE que completar an | | | | | | |
| Bajo pena de perjurio, correcta y completa. I | declaro que he examinado esta a declaración del preparador (o) | planilla, incluyendo l | os anexos e informes adjui | ntos, y que, a mi le | al saber y entender, es veridica, cual el preparador tenga conocimier | | |
| | 1 minning | ONAh | Escriba su nombre d | en r | | | |
| nombre / | 11111111111111111111111111111111111111 | | letra de molde aquí | Harmon Contractor | el Pilar Munoz | | |
| aquí (| UMERAUXU | lle | Escriba su cargo er letra de molde aqui | | | | |
| | | | Mejor núm, de teléfe | Lucia | | | |
| Fecha 10 | 27,2016 | | Samarlo durante el o | | 787-272-5900 | | |
| Para uso exclusivo d | lel preparador remunera | do | Marque s | usted trabaja p | oor cuenta propia [| | |
| Nombre del preparador | | | | PTIN | | | |
| Firma del | 100 | | | 7) 118 v | W W | | |
| preparador Nombre de la empresa | | | | Fecha | 1 1 | | |
| (o el suyo, si trabaja por cuenta propia) | | | 90 | EIN | | | |
| | | - 3 | | → Núm, de | | | |
| Dirección | | | - 10 | teléfono | | | |
| | | | | The state of the s | | | |

U.S. Postal Service. Case:16-09134-ESL11 CD0c#:1 EFiled:11/17/16 EEntered:11/17/16 19:02:31 Desc: Main Domestic MDocumentum Pager 45 of 589 1 DGDENy UT 84409 20 009 Politico Q 55 \$0.00 Certified For E000 \$0.00 Return Receipt Fee (Endorsement Required) \$0.00 (Late Restricted Delivery Fee (Endorsement Required) 570 40.4 11/04/2016 \$5.47 INTERNA REVENE DENICE TIUL Street, Api, No. Po Box 409101 COOK STORE STP-4 OCTOPY, UT 84409

For the One Month Ending October 31, 2016

| | | Year to Date | | | Current Month | |
|--|----|-----------------------|--------------|-------|------------------|----------------|
| Revenues Sales- Construction & Installa | \$ | 7,813.00 | 2.40 | \$ | 0.00 | 0.00 |
| Sales- Construction & Instana Sales- Construction Maintenanc | Ф | 317,418.73 | 97.48 | Ф | 16,630.95 | 100.00 |
| Interest Income | | 2.56 | 0.00 | | 0.00 | 0.00 |
| Other Income | | 406.15 | 0.12 | _ | 0.00 | 0.00 |
| Total Revenues | _ | 325,640.44 | 100.00 | _ | 16,630.95 | 100.00 |
| Cost of Sales | | | | | | |
| Salaries & Wages Maintenance | | 14,728.58 | 4.52 | | 1,276.50 | 7.68 |
| Overtime Service | | 631.50 | 0.19 | | 226.50 | 1.36 |
| Salaries & Wages US CUSTOMS | | 17,114.51 | 5.26 | | 1,366.05 | 8.21 |
| Salaries & Wages US CUSTOMS | | 1,746.18 | 0.54 | | 97.56 | 0.59 |
| Salaries & Wages Construction | | 10,773.00 | 3.31 | | 864.00 | 5.20 |
| FICA Expense Maintenance | | 8,674.70 | 2.66 | | 734.65 | 4.42 |
| FICA Expense Construction | | 1,215.38 | 0.37 | | 161.30 | 0.97 |
| FUTA Expense Maintenance | | 329.65 | 0.10 | | 25.93 | 0.16 |
| FUTA Expense Construccion | | 46.72 | 0.01 | | 6.32 | 0.04 |
| Materials Maintenance Services | | 11,584.21 | 3.56 | | 0.00 | 0.00 |
| Materials Construction | | 35,383.35 | 10.87 | | 0.00 | 0.00 |
| Truck Expenses Maintenance | | 32,562.55 | 10.00 | | 2,159.18 | 12.98 |
| Truck Expenses Construction | | 379.56 | 0.12 | | 0.00 | 0.00 |
| Repairs & Maintenance Mainten | | 410.00 | 0.13 | | 0.00 | 0.00 |
| Repairs & Maintenance Construc | | 320.00 | 0.10 | | 0.00 | 0.00 |
| Insurance Expense Maintenance Cost of Sales- Salaries and Wa | | 1,839.00 30,296.26 | 0.56 9.30 | | 0.00 3,065.20 | 0.00 18.43 |
| Total Cost of Sales | - | 168,035.15 | 51.60 | _ | 9,983.19 | 60.03 |
| | - | 100,033.13 | 31.00 | _ | <u> </u> | 00.03 |
| Gross Profit | = | 157,605.29 | 48.40 | _ | 6,647.76 | 39.97 |
| Expenses | | | | | | |
| Accounting Expense | | 5,654.19 | 1.74 | | 0.00 | 0.00 |
| Truck Repair, Licence Expenses | | 2,413.14 | 0.74 | | 0.00 | 0.00 |
| Truck expenses oficina | | 3,384.87 | 1.04 | | 80.00 | 0.48 |
| Bank Charges | | 2,581.77 | 0.79 | | 10.00 | 0.06 |
| Dues and Subscriptions Exp | | 1,027.50 | 0.32 | | 0.00 | 0.00 |
| Income Tax Expense | | 1,877.70 | 0.58 | | 0.00 | 0.00 |
| Bid Expense | | 88.20 | 0.03 | | 0.00 | 0.00 |
| FSE | | 8,993.77 | 2.76 | | 399.65 | 2.40 |
| Insurance Expense | | 1,943.63 | 0.60 | | 0.00 | 0.00 |
| Late Charges | | 53.00 | 0.02 | | 0.00 | 0.00 |
| Legal and Professional Expense | | 10,655.00 | 3.27 | | 0.00 | 0.00 |
| Maintenance Expense | | 2,450.20 | 0.75 | | 0.00 | 0.00 |
| Office Supplies Exp. | | 4,943.90 | 1.52 0.21 | | 468.18 | 2.82 |
| Other Office Expense Patente Municipal | | 679.36 (480.33) | (0.15) | | 0.00 0.00 | $0.00 \\ 0.00$ |
| Postage Expense | | 130.00 | 0.13) | | 0.00 | 0.00 |
| Rent or Lease Expense | | 16,694.76 | 5.13 | | 896.94 | 5.39 |
| Salaries Expense | | 8,667.78 | 2.66 | | 1,582.20 | 9.51 |
| Software Expense | | 143.88 | 0.04 | | 0.00 | 0.00 |
| Christmast Bonus Administrativ | | 1,800.00 | 0.55 | | 0.00 | 0.00 |
| Management Diff Fee | | 24,106.47 | 7.40 | | 3,234.14 | 19.45 |
| Telephone & Commun | | 11,092.10 | 3.41 | | 815.44 | 4.90 |
| Celullar & Beeper Expense | | 1,430.00 | 0.44 | | 0.00 | 0.00 |
| Utilities Expense | | 5,164.94 | 1.59 | | 373.83 | 2.25 |
| Other Expense | _ | (37.97) | (0.01) | _ | 0.00 | 0.00 |
| Total Expenses | | 115,457.86 | 35.46 | | 7,860.38 | 47.26 |
| | | For Mone | gement Di | irpoc | ec Only | |

For Management Purposes Only

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

Page: 2

POWERCOOLING & GOOD Into 8
Income Statement

Income Statement
For the One Month Ending October 31, 2016

 Year to Date
 Current Month

 Net Income
 \$ 42,147.43
 12.94
 \$ (1,212.62)
 (7.29)

For the One Month Ending October 31, 2016

| _ | | Year to Date | | | Current Month | |
|---|----|--------------------|--------------|-------|------------------|----------------|
| Revenues Sales- Construction & Installa | \$ | 7,813.00 | 2.40 | \$ | 0.00 | 0.00 |
| Sales- Construction Maintenanc | Ψ | 317,418.73 | 97.48 | Ψ | 16,630.95 | 100.00 |
| Interest Income | | 2.56 | 0.00 | | 0.00 | 0.00 |
| Other Income | _ | 406.15 | 0.12 | _ | 0.00 | 0.00 |
| Total Revenues | = | 325,640.44 | 100.00 | _ | 16,630.95 | 100.00 |
| Cost of Sales | | | | | | |
| Salaries & Wages Maintenance | | 14,728.58 | 4.52 | | 1,276.50 | 7.68 |
| Overtime Service | | 631.50 | 0.19 | | 226.50 | 1.36 |
| Salaries & Wages US CUSTOMS | | 17,114.51 | 5.26 | | 1,366.05 | 8.21 |
| Salaries & Wages US CUSTOMS | | 1,746.18 | 0.54 | | 97.56 | 0.59 |
| Salaries & Wages Construction | | 10,773.00 | 3.31 | | 864.00 | 5.20 |
| FICA Expense Maintenance | | 8,674.70 | 2.66 | | 734.65 | 4.42 |
| FICA Expense Construction | | 1,215.38 | 0.37 | | 161.30 | 0.97 |
| FUTA Expense Maintenance FUTA Expense Construccion | | 329.65 46.72 | 0.10 0.01 | | 25.93 6.32 | 0.16 0.04 |
| Materials Maintenance Services | | 11,584.21 | 3.56 | | 0.00 | 0.04 |
| Materials Construction | | 35,383.35 | 10.87 | | 0.00 | 0.00 |
| Truck Expenses Maintenance | | 32,562.55 | 10.00 | | 2,159.18 | 12.98 |
| Truck Expenses Construction | | 379.56 | 0.12 | | 0.00 | 0.00 |
| Repairs & Maintenance Mainten | | 410.00 | 0.13 | | 0.00 | 0.00 |
| Repairs & Maintenance Construc | | 320.00 | 0.10 | | 0.00 | 0.00 |
| Insurance Expense Maintenance | | 1,839.00 | 0.56 | | 0.00 | 0.00 |
| Cost of Sales- Salaries and Wa | _ | 30,296.26 | 9.30 | _ | 3,065.20 | 18.43 |
| Total Cost of Sales | _ | 168,035.15 | 51.60 | _ | 9,983.19 | 60.03 |
| Gross Profit | _ | 157,605.29 | 48.40 | _ | 6,647.76 | 39.97 |
| Expenses | | | | | | |
| Accounting Expense | | 5,654.19 | 1.74 | | 0.00 | 0.00 |
| Truck Repair, Licence Expenses | | 2,413.14 | 0.74 | | 0.00 | 0.00 |
| Truck expenses oficina | | 3,384.87 | 1.04 | | 80.00 | 0.48 |
| Bank Charges | | 2,581.77 | 0.79 | | 10.00 | 0.06 |
| Dues and Subscriptions Exp | | 1,027.50 | 0.32 | | 0.00 | 0.00 |
| Income Tax Expense | | 1,877.70 88.20 | 0.58 0.03 | | 0.00 0.00 | $0.00 \\ 0.00$ |
| Bid Expense FSE | | 8,993.77 | 2.76 | | 399.65 | 2.40 |
| Insurance Expense | | 1,943.63 | 0.60 | | 0.00 | 0.00 |
| Late Charges | | 53.00 | 0.02 | | 0.00 | 0.00 |
| Legal and Professional Expense | | 10,655.00 | 3.27 | | 0.00 | 0.00 |
| Maintenance Expense | | 2,450.20 | 0.75 | | 0.00 | 0.00 |
| Office Supplies Exp. | | 4,943.90 | 1.52 | | 468.18 | 2.82 |
| Other Office Expense | | 679.36 | 0.21 | | 0.00 | 0.00 |
| Patente Municipal | | (480.33) | (0.15) | | 0.00 | 0.00 |
| Postage Expense | | 130.00 | 0.04 | | 0.00 | 0.00 |
| Rent or Lease Expense | | 16,694.76 | 5.13 | | 896.94 | 5.39 |
| Salaries Expense | | 8,667.78 143.88 | 2.66 0.04 | | 1,582.20 0.00 | 9.51 0.00 |
| Software Expense Christmast Bonus Administrativ | | 1,800.00 | 0.04 | | 0.00 | 0.00 |
| Management Diff Fee | | 24,106.47 | 7.40 | | 3,234.14 | 19.45 |
| Telephone & Commun | | 11,092.10 | 3.41 | | 815.44 | 4.90 |
| Celullar & Beeper Expense | | 1,430.00 | 0.44 | | 0.00 | 0.00 |
| Utilities Expense | | 5,164.94 | 1.59 | | 373.83 | 2.25 |
| Other Expense | _ | (37.97) | (0.01) | _ | 0.00 | 0.00 |
| Total Expenses | | 115,457.86 | 35.46 | | 7,860.38 | 47.26 |
| | | For Mone | gement Di | irnos | ec Only | |

For Management Purposes Only

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

Page: 2

POWER GOOD LINE & GOOD INTO 8
Income Statement

Income Statement
For the One Month Ending October 31, 2016

 Year to Date
 Current Month

 Net Income
 \$ 42,147.43
 12.94
 \$ (1,212.62)
 (7.29)

POWER COOLING CONTROLS, INC. PO BOX 192817

SAN JUAN, PR 00919-2817

JWD ENGINEERING CORP PO BOX 3645 GUAYNABO, PR 00970 WILMER MORALES FONSECA ES DE DIEGO LAW OFFICES P.S.C. PO BOX 79552 CAROLINA, PR 00984-9552

LYSSETTE A MORALES VIDAL
L.A. MORALES & ASSOCIATES P.S.C.
URB VILLA BLANCA
76 AQUAMARINA
CAGUAS, PR 00725-1908

LUIS GERALD
1045 CALLE M
GUAYNABO, PR

LUIS GERALD DEL PILAR & IVELISSE RDZ 1045 CALLE M GUAYNABO, PR 00969

ALBERTO DE DIEGO COLLAR ESQ ORIENTAL BANK / TC ASSETS CO PO BOX 79552 CAROLINA, PR 00984-9552 MUNICIPALITY OF GUAYNABO PO BOX 7885 GUAYNABO, PR 00970

ANDRES RODRIGUEZ BURGOS 30 RPTO PINEIRO GUAYNABO, PR 00969-5650 ORIENTAL BANK PO BOX 195115 SAN JUAN, PR 00919-5115

CAPITAL CROSSING PR LLC FBO TRIANGLE CAYMAN ASSET CO PO BOX 70111 SAN JUAN, PR 00936 ORIENTAL F/K/A EUROBANK PO BOX 364745 SAN JUAN, PR 00936-4745

CRIM BANKRUPTCY DIVISION PO BOX 195387 SAN JUAN, PR 00919 REFRICENTRO 380 BARBOSA AVE SAN JUAN, PR 00917

ELA DEPT OF TREASURY BANKRUPTCY DIV OFIC 424 B PO BOX 9024140 SAN JUAN, PR 00902-0140 STERICYCLE COMSOL 26604 NETWORK PLACE CHICAGO, IL 60673-1266

IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 TRANE PR INC PO BOX 9000 SAN JUAN, PR 00908-9000

IVETTE MONTES LEBRON, ESQ PO BOX 11850 STE 102 SAN JUAN, PR 00922-1850 VPNET PO BOX 193780 SAN JUAN, PR 00919-3780 Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 51 of 58

United States Bankruptcy Court District of Puerto Rico

| | Di | Strict of 1 derito Kico | | |
|--|---|--|--------------------------------------|---|
| In re POWER COOLING CONTROLS | , INC. | | Case No. | |
| | | Debtor(s) | Chapter | 11 |
| | | | | |
| CORE | PORATE OWNI | ERSHIP STATEMENT | (RULE 7007.1) | |
| Pursuant to Federal Rule of Bankru or recusal, the undersigned counsel that the following is a (are) corpora 10% or more of any class of the cor 7007.1: | for <u>POWER CO</u> ntion(s), other tha | ooling controls, inc in the debtor or a governi | in the above of mental unit, that di | captioned action, certifies rectly or indirectly own(s) |
| ■ None [<i>Check if applicable</i>] | | | | |
| November 17, 2016 | /s/ | Lyssette A Morales V | /idal | |
| Date | Lyss | sette A Morales Vidal | 120011 | |
| | Cour L.A. URB 76 A Cagu | nsel for POWER COOLIN MORALES & ASSOCIATE VILLA BLANCA AQUAMARINA Las, PR 00725-1908 -746-2434 | G CONTROLS, INC | |

lamoraleslawoffice@gmail.com

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Documentlanc Page 52 of 58

October 31, 2016

ASSETS

| Current Assets | ¢. | 400.00 | | | |
|--------------------------------|----|--------------|---------|------------|--------|
| Petty Cash | \$ | 400.00 | | | |
| C D BPPR | | (1.11) | | | |
| BPPR antes WB PCC - 131-379690 | | 14,107.71 | | | |
| BPPR DGM - 362-09821 | | 4,775.09 | | | |
| ORIENTAL ant EuroPCC -5033 | | 593.13 | | | |
| DORAL BANK | | (1,884.60) | | | |
| Accounts Receivable | | 196,808.32 | | | |
| Accounts Receivable - DGM | | 47,833.68 | | | |
| A/R JWD Engineering | | 14,387.64 | | | |
| A/R Stockholders | | 19,201.72 | | | |
| 7% Withheld from Customers | | 9,299.11 | | | |
| IncomeTax Reimb Receivable2013 | | 16,621.00 | | | |
| IncomeTax Reimb Receivable2014 | | 17,452.75 | | | |
| Marketable Securities-Oriental | | (2,177.24) | | | |
| Unrealized Loss on Marketable | | 1,376.53 | | | |
| Prepaid Insurance | | 120.00 | | | |
| Prepaid Income Tax | | 80,000.00 | | | |
| Deferred Tax Assets | | 80,059.00 | | | |
| Total Current Assets | - | | | 498,972.73 | |
| Total Cultent Assets | | | | 490,972.73 | |
| Property and Equipment | | | | | |
| Furniture and Fixtures | | 7,250.82 | | | |
| Office Equipment | | 5,710.08 | | | |
| Machinery & Equipment | | 37,121.00 | | | |
| Motor Vehicle | | 394,876.60 | | | |
| Buildings | | 135,550.05 | | | |
| Accum. Depreciation-Furniture | | (7,250.82) | | | |
| Accum. DeprOffice Equipment | | (5,710.08) | | | |
| Accum. DeprMach. & Equip | | (37,121.00) | | | |
| Accum. DeprMotor Vehicle | | (392,864.69) | | | |
| Accum. Depreciation-Leasehold | | (20,334.00) | | | |
| T . 15 | - | <u>·</u> | | 117.007.07 | |
| Total Property and Equipment | | | | 117,227.96 |) |
| Other Assets | _ | | | | |
| Total Other Assets | | | | 0.00 |) |
| | | | _ | | - |
| Total Assets | | | \$ = | 616,200.69 | , = |
| | | | | | |
| | | LIABILIT | TES A | ND CAPITAL | |
| | | | | | |
| Current Liabilities | | | | | |
| Accounts Payable | \$ | 48,650.20 | | | |
| ASUME | | (217.00) | | | |
| Accrued Expenses | | 31.14 | | | |
| Accrued Payroll Payable | | 43,830.70 | | | |
| Accrued Municipal Patent Pay | | 7,826.94 | | | |
| FICA Tax Payable | | (1,385.18) | | | |
| FUTA Tax Payable | | 1,252.66 | | | |
| SUTA Tax Payable | | (4,287.92) | | | |
| Disability Payable | | 491.20 | | | |
| Drivers Insurance Payable | | 70.40 | | | |
| Income Taxes Withheld | | (470.96) | | | |
| Income Tay Withheld 7% | | (734.92) | | | |

(734.92)

348.80

Unaudited - For Management Purposes Only

Income Tax Withheld 7%

4% B2B

Case:16-09134-ESL11 Doc#:1powerclob/117/16 Centered:11/17/16 19:02:31 Desc: Main Documentance 53 of 58 October 31, 2016

| United Ins Fin Co Inc Oriental CR 495k Principal | (2,448.98) 456,364.15 | |
|---|--------------------------|------------------|
| Total Current Liabilities | | 549,321.23 |
| Long-Term Liabilities | | |
| Total Long-Term Liabilities | | 0.00 |
| Total Liabilities | | 549,321.23 |
| Capital | | |
| Common Stock | 3,100.00 | |
| Retained Earnings | 137,521.12 | |
| Unrealized Loss on Marketable | 1,376.57 | |
| Net Income | (75,118.23) | |
| Total Capital | | 66,879.46 |
| Total Liabilities & Capital | : | \$ 616,200.69 |

For the One Month Ending October 31, 2016

| | | Year to Date | | | Current Month | |
|--|----|------------------------|----------------|----|-------------------|----------------|
| Revenues Salas Construction & Installa | \$ | 7 912 00 | 2.40 | \$ | 0.00 | 0.00 |
| Sales- Construction & Installa Sales- Construction Maintenanc | Ф | 7,813.00 317,418.73 | 97.48 | Ф | 0.00 16,630.95 | 0.00 100.00 |
| Interest Income | | 2.56 | 0.00 | | 0.00 | 0.00 |
| Other Income | | 406.15 | 0.12 | | 0.00 | 0.00 |
| Total Revenues | _ | 325,640.44 | 100.00 | _ | 16,630.95 | 100.00 |
| Cost of Sales | | | | | | |
| Salaries & Wages Maintenance | | 14,728.58 | 4.52 | | 1,276.50 | 7.68 |
| Overtime Service | | 631.50 | 0.19 | | 226.50 | 1.36 |
| Salaries & Wages US CUSTOMS | | 17,114.51 | 5.26 | | 1,366.05 | 8.21 |
| Salaries & Wages US CUSTOMS | | 1,746.18 | 0.54 | | 97.56 | 0.59 |
| Salaries & Wages Construction | | 10,773.00 | 3.31 | | 864.00 | 5.20 |
| FICA Expense Maintenance | | 8,674.70 | 2.66 | | 734.65 | 4.42 |
| FICA Expense Construction | | 1,215.38 | 0.37 | | 161.30 | 0.97 |
| FUTA Expense Maintenance | | 329.65 | 0.10 | | 25.93 | 0.16 |
| FUTA Expense Construccion | | 46.72 | 0.01 | | 6.32 | 0.04 |
| Materials Maintenance Services Materials Construction | | 11,584.21 | 3.56 10.87 | | $0.00 \\ 0.00$ | $0.00 \\ 0.00$ |
| Truck Expenses Maintenance | | 35,383.35 32,562.55 | 10.87 | | 2,159.18 | 12.98 |
| Truck Expenses Maintenance Truck Expenses Construction | | 379.56 | 0.12 | | 0.00 | 0.00 |
| Repairs & Maintenance Mainten | | 410.00 | 0.12 | | 0.00 | 0.00 |
| Repairs & Maintenance Construc | | 320.00 | 0.10 | | 0.00 | 0.00 |
| Insurance Expense Maintenance | | 1,839.00 | 0.56 | | 0.00 | 0.00 |
| Cost of Sales- Salaries and Wa | | 30,296.26 | 9.30 | | 3,065.20 | 18.43 |
| Total Cost of Sales | _ | 168,035.15 | 51.60 | _ | 9,983.19 | 60.03 |
| Gross Profit | = | 157,605.29 | 48.40 | = | 6,647.76 | 39.97 |
| Expenses | | | | | | |
| Accounting Expense | | 5,654.19 | 1.74 | | 0.00 | 0.00 |
| Truck Repair, Licence Expenses | | 2,413.14 | 0.74 | | 0.00 | 0.00 |
| Truck expenses oficina | | 3,384.87 | 1.04 | | 80.00 | 0.48 |
| Bank Charges | | 2,581.77 | 0.79 | | 10.00 | 0.06 |
| Dues and Subscriptions Exp | | 1,027.50 | 0.32 | | 0.00 | 0.00 |
| Income Tax Expense | | 1,877.70 | 0.58 | | 0.00 | 0.00 |
| Bid Expense | | 88.20 | 0.03 | | 0.00 | 0.00 |
| FSE | | 8,993.77 | 2.76 | | 399.65 | 2.40 |
| Insurance Expense | | 1,943.63 | 0.60 | | 0.00 | 0.00 |
| Late Charges Legal and Professional Expense | | 53.00 10,655.00 | 0.02 3.27 | | $0.00 \\ 0.00$ | $0.00 \\ 0.00$ |
| Maintenance Expense | | 2,450.20 | 0.75 | | 0.00 | 0.00 |
| Office Supplies Exp. | | 4,943.90 | 1.52 | | 468.18 | 2.82 |
| Other Office Expense | | 679.36 | 0.21 | | 0.00 | 0.00 |
| Patente Municipal | | (480.33) | (0.15) | | 0.00 | 0.00 |
| Postage Expense | | 130.00 | 0.04 | | 0.00 | 0.00 |
| Rent or Lease Expense | | 16,694.76 | 5.13 | | 896.94 | 5.39 |
| Salaries Expense | | 8,667.78 | 2.66 | | 1,582.20 | 9.51 |
| Software Expense | | 143.88 | 0.04 | | 0.00 | 0.00 |
| Christmast Bonus Administrativ | | 1,800.00 | 0.55 | | 0.00 | 0.00 |
| Management Diff Fee | | 24,106.47 | 7.40 | | 3,234.14 | 19.45 |
| Telephone & Commun | | 11,092.10 | 3.41 | | 815.44 | 4.90 |
| Celullar & Beeper Expense | | 1,430.00 | 0.44 | | 0.00 | 0.00 |
| Utilities Expense Other Expense | | 5,164.94 (37.97) | 1.59 (0.01) | | 373.83 0.00 | 2.25 0.00 |
| | _ | | ` ' | _ | | |
| Total Expenses | | 115,457.86 | 35.46 | | 7,860.38 | 47.26 |

For Management Purposes Only

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main

Page: 2

POWER GOODLING & GOOD INTO 8 Into 8 Income Statement

Income Statement
For the One Month Ending October 31, 2016

 Year to Date
 Current Month

 Net Income
 \$ 42,147.43
 12.94
 \$ (1,212.62)
 (7.29)

Formulario 941-PR para 2016: Planilla para la Declaración Federal TRIMESTRAL del Patrono

| \$50.05E | re (el de usted, no el de su negocio) | | | | enero, febrero, marzo |
|----------------------------|---|--|--|--|--|
| lomb | re comercial (si alguno) POWERCOOLI | NG & CONTROLS, IN | IC | 1 | abril, mayo, junio |
|)ireco | P O BOX 192817 | | | | julio, agosto, septiembre |
| neec | Número Calle | Nűr | mero de oficina o de hi | abitación | octubre, noviembre, diciembre |
| | SAN JUAN | PR | 00926 | | contrar instrucciones y formularios de años s en www.irs.gov/form941pr, |
| | Cluded | Estado | Código pestal (2 | (19) Live (1981/4/18) | Control Conselled Service Management |
| | Nombre del país extranjero Prov | rincia extranjera/condado | Código postal extra | njero | |
| ia las | s instrucciones por separado antes de co | mpletar el Formulario 941 | I-PR. Escriba a r | naquinilla o en letra c | de molde dentro de los encasillados |
| arte | 1: Conteste las preguntas a cor Número de empleados que recib | | MANUFACTURE OF THE PARTY OF THE | | |
| 2 | (2do trimestre), 12 de septiembre (3 | er trimestre) o 12 de dio | piembre (4to trii | mestre) 1 | |
| 4 | Si los salarios, propinas y otras rer | nuneraciones no están | suietos a las o | contribuciones al | THE RESERVE OF THE PARTY OF THE PARTY OF |
| | Seguro Social y al Medicare | | | | Marque aquí y pase a la línea t |
| 5a | Salarios sujetos a la | Columna 1 | | Columna 2 | -0 |
| | contribución al Seguro Social | 38,476 . 32 | × .124 = | 4,771 . 0 | 06 |
| 444 | Propinas sujetas a la | | | | ₹ |
| 5b | contribución al Seguro Social | Y | x .124 = | 0. | |
| 5b 5c | Salarios y propinas sujetos a la | 20.404 20 | x .124 = | 300,100 | |
| 987-671.0 987-671.0 | Salarios y propinas sujetos a la contribución al <i>Medicare</i> Salarios y propinas sujetos a la | 38,476. 32 | | 307,15 | 31 |
| 5c | Salarios y propinas sujetos a la contribución al Medicare | 38,476 . 32 | | 300,100 | |
| 5c | Salarios y propinas sujetos a la contribución al <i>Medicare</i> Salarios y propinas sujetos a la retención de la Contribución | Wild State of State o | × .029 = | 1,115 . 8 | |
| 5c 5d | Salarios y propinas sujetos a la contribución al <i>Medicare</i> Salarios y propinas sujetos a la retención de la Contribución Adicional al <i>Medicare</i> Sume la Columna 2 de las líneas 5a, Notificación y solicitud de pago con | 5b, 5c y 5d | × .029 = × .009 = | 1,115 . 8 0 5e ion adeudada | 5,886 . 8 |
| 5c 5d 5e 5f | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas 5a, Notificación y solicitud de pago con por propinas no declaradas (vea las | 5b, 5c y 5d | × .029 = × .009 = 1(q): Contribuci | 1,115 . 8 0 5e ion adeudada | 5,886 . 8 |
| 5c 5d 5e 5f | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las tineas 5a, Notificación y solicitud de pago con por propinas no declaradas (vea las Total de contribuciones antes de aju | 5b, 5c y 5d forme a la sección 312 instrucciones) | × .029 = × .009 = 1(q): Contribucion | 1,115 8 0 | 5,886 . 8 0 . 5,886 . 8 |
| 5c 5d 5e 5f 6 7 | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas 5a, Notificación y solicitud de pago con por propinas no declaradas (vea las Total de contribuciones antes de aju Ajustes por fracciones de centavos | 5b, 5c y 5d forme a la sección 312 instrucciones) | × .029 = × .009 = 1(q): Contribucion | 1.115 . 8 0 . 5e ion adeudada | 5,886 . 8 0 . 5,886 . 8 0 . I |
| 5c 5d 5e 5f 6 7 8 | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas 5a, Notificación y solicitud de pago con por propinas no declaradas (vea las Total de contribuciones antes de aju Ajustes por fracciones de centavos Ajustes por compensación por enfe | 5b, 5c y 5d | × .029 = × .009 = 1(q): Contribucion y 5f | 1,115 8 0 s 0 s 5e on adeudada 5f 7 | 5,886 . 8 0 . 5,886 . 8 |
| 5c 5d 5e 5f 6 7 8 | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas 5a, Notificación y solicitud de pago con por propinas no declaradas (vea las Total de contribuciones antes de aju Ajustes por fracciones de centavos Ajustes por compensación por enfe Ajustes por propinas y por seguro te | 5b, 5c y 5d | × .029 = × .009 = I (q): Contribucion of the second of | 1,115 8 0 s 0 s 5e on adeudada 5f 7 | 5,886 . 8 0 . 5,886 . 8 0 . 1 |
| 5c 5d 5e 5f 6 7 8 9 | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas 5a, Notificación y solicitud de pago con por propinas no declaradas (vea las Total de contribuciones antes de aju Ajustes por fracciones de centavos Ajustes por compensación por enfe Ajustes por propinas y por seguro te | 5b, 5c y 5d | × .029 = × .009 = (q): Contribucion of the set of t | 1,115 8 0 | 5,886 . 8 0 . 5,886 . 8 0 . 1 |
| 5c 5d 5e 5f 6 7 8 9 | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas 5a, Notificación y solicitud de pago con por propinas no declaradas (vea las Total de contribuciones antes de aju Ajustes por fracciones de centavos Ajustes por compensación por enfe Ajustes por propinas y por seguro to trimestre actual | forme a la sección 312 instrucciones) | × .029 = × .009 = (q): Contribucion of the second of t | 1,115 . 8 0 . 5e ion adeudada | 5,886 . 8 0 . 5,886 . 8 0 . 1 0 . |
| 5c 5d 5e 5f 6 7 8 9 10 111 | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas 5a, Notificación y solicitud de pago con por propinas no declaradas (vea las Total de contribuciones antes de aju Ajustes por fracciones de centavos Ajustes por compensación por enfe Ajustes por propinas y por seguro te trimestre actual Total de contribuciones después de Total de depósitos para este trime aplicada de un trimestre anterior, Formulario 941-X (PR), 941-X, 944-X Saldo adeudado, Si la línea 10 es | forme a la sección 312 instrucciones) | × .029 = × .009 = 1(q): Contribucion of the second of | 1.115 . 8 0 . 5e ion adeudada . 5f . 6 . 7 . 8 o del . 9 neas 6 a 9 . 10 da en exceso aplicada del en curso . 11 | 5,886 8 0 |
| 5c 5d 5e 5f 6 7 | Salarios y propinas sujetos a la contribución al Medicare Salarios y propinas sujetos a la retención de la Contribución Adicional al Medicare Sume la Columna 2 de las líneas 5a, Notificación y solicitud de pago con por propinas no declaradas (vea las Total de contribuciones antes de aju Ajustes por fracciones de centavos Ajustes por compensación por enfe Ajustes por propinas y por seguro te trimestre actual Total de contribuciones después de Total de depósitos para este trime aplicada de un trimestre anterior, Formulario 941-X (PR), 941-X, 944-X Saldo adeudado, Si la línea 10 es | forme a la sección 312 instrucciones) | × .029 = × .009 = (q): Contribucion of the second of t | 1.115 . 8 0 . 5e on adeudada | 5,886 8 0 |

Case:16-09134-ESL11 Doc#:1 Filed:11/17/16 Entered:11/17/16 19:02:31 Desc: Main Document Page 57 of 58 Nombre (el de usted, no el de su negocio) Número de identificación patronal (EIN)

| | re (e) de usted, | | CI w C | | | Número de ide | |
|----------|--|--|--|---|---|---|--|
| and the | ercooling & | | | | 385 | | 66-0586956 |
| | | | sobre su itinerario de de | | | | |
| Si | no está segi | ıro de s | i es depositante de itiner | ario mensual o | de itinerario bisemanal, | vea el aparta | ndo 11 de la Pub. 179. |
| 4 | Marque un | io: [| depositar \$100,000 el próxi pero la línea 10 de la planilla es depositante de itinerario r bisemanal, adjunte el Anexo | imo día durante el sen curso es \$100, mensual, complete B (Formulario 941- río mensual para tr | I trimestre en curso. Si la lin 000 o más, usted tiene que p el itinerario de depósitos, a « PR). Pase a la Parte 3. odo el trimestre. Anote la ol | ea 10 del trime roveer un regis continuación; s | usted no tuvo una obligación de stre anterior era menos de \$2,500 stro de su obligación contributiva. S les depositante de itinerario butiva para cada mes y la obligació |
| | | | Obligación contributiva: | Mes 1 | 2,890 . | 72 | |
| | | | | Mes 2 | 1,962 | 40 | |
| | | | | Mes 3 | 1,033 . | 62 | |
| | | | Total para el | | 5,886 . | 74 Fitota | (4) |
| | | | - 22 | | 1000-000 | | l tiene que ser igual a la linea 10. mplete él Anexo B (Formulario |
| | | 1 | 941-PR): Registro de la Obli | gación Contributiva | para los Depositantes de Iti | nerario Bisema | nal, y adjúntelo al Formulario 941-F |
| 20 | . 0. 1-41- | | 24. | OR W TO THE | 100 | - 27 | 20 102W 102 |
| rte | e 3: Infór | menos | sobre su negocio. Si cu | alquiera de las | preguntas NO corresp | onde a su n | egocio, déjela en blanco. |
| | Si su nego | cio ha c | lejado de operar o si uste | ed ha dejado de | pagar salarios | 20 20 20 20 2 | . Marque aguí y |
| | | | 5 1 | | · | | |
| | anote la últ | ma fech | a en la que pagó salarios | 1 1 | 3.0 | 83 | |
| | Si es patro | no esta | cional y no tiene que radi | icar nlanillas na | | | FT |
| | | | | | ra cada trimestre del an | 0 | . Marque agui. |
| 11.5 | VID - Dead | | | 32. | | 0 | . Marque aquí. |
| arto | | | omunicarnos con su ter | rcero autorizad | lo? | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| arto | ¿Desea pe | rmitir q | omunicarnos con su ter ue un empleado, prepara | rcero autorizad | lo? | | |
| arte | ¿Desea pe | rmitir q | omunicarnos con su ter | rcero autorizad | lo? | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| rte | ¿Desea pe instrucciono | rmitir qu es para i | omunicarnos con su ter de un empleado, prepara más detalles. úm. de | rcero autorizad | lo? | | |
| rte | ¿Desea pe instruccione Si. Non telét | rmitir q əs para | omunicarnos con su ter de un empleado, prepara más detalles. úm. de | rcero autorizad | lo? | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| rte | ¿Desea pe instruccione Si. Non telét desi | rmitir q es para obre y n fono del gnado | omunicarnos con su ter de un empleado, prepara más detalles. úm. de tercero | rcero autorizad | lo? u otra persona hable s | obre esta pla | inilla con el IRS? Vea las |
| irti | ¿Desea per instruccione Si. Non telér desi | rmitir q es para obre y n fono del gnado | omunicarnos con su ter de un empleado, prepara más detalles. úm. de | rcero autorizad | lo? u otra persona hable s | obre esta pla | inilla con el IRS? Vea las |
| 200 | ¿Desea pe instruccione Si. Non telé desi Sele No. | rmitir q es para i nbre y ni fono del gnado eccione | omunicarnos con su ter ue un empleado, prepara més detalles. im. de tercero un número de identificación | rcero autorizad dor remunerado n personal (PIN) e | lo? o u otra persona hable s de 5 dígitos que usará al | obre esta pla | inilla con el IRS? Vea las |
| 200 | ¿Desea pe instruccione Si. Non telé desi Sele No. | rmitir q es para i nbre y ni fono del gnado eccione | omunicarnos con su ter de un empleado, prepara más detalles. úm. de tercero | rcero autorizad dor remunerado n personal (PIN) e | lo? o u otra persona hable s de 5 dígitos que usará al | obre esta pla | inilla con el IRS? Vea las |
| | ¿Desea per instruccione Sí. Non telét desi Selet No. 5: Firme Bajo pena de | rmitir ques para la | comunicarnos con su ter ue un empleado, prepara más detalles. im. de tercero un número de identificación riene que completar an declaro que he examinado esta | n personal (PIN) o | de 5 digitos que usará al lel Formulario 941-PR y | obre esta pla hablar con el | IRS |
| | ¿Desea per instruccione Sí. Non telét desi Selet No. 5: Firme Bajo pena de | rmitir ques para la | comunicarnos con su ter ue un empleado, prepara más detalles. im. de tercero un número de identificación riene que completar an declaro que he examinado esta | n personal (PIN) o | de 5 dígitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yyente) está basada en toda in | obre esta pla hablar con el | IRS |
| | ¿Desea per instruccione Si. Non telét desi Selet No. Si: Firme Bajo pena de correcta y correcta | rmitir ques para la | comunicarnos con su ter ue un empleado, prepara más detalles. im. de tercero un número de identificación riene que completar an declaro que he examinado esta | n personal (PIN) o | de 5 digitos que usará al lel Formulario 941-PR y | nablar con el | IRS |
| 200 | ¿Desea per instruccione Si. Non telét desi Selet No. Si: Firme Bajo pena de correcta y cor Firme su nombre | rmitir ques para la | comunicarnos con su ter ue un empleado, prepara más detalles. im. de tercero un número de identificación riene que completar an declaro que he examinado esta | n personal (PIN) o | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto lyente) está basada en toda in Escriba su nombre en letra de molde aqui | hablar con el / luego FIRM s, y que, a mi le formación de la | IRS. |
| | ¿Desea per instruccione Si. Non telét desi Selet No. Si: Firme Bajo pena de correcta y correcta | rmitir ques para la | comunicarnos con su ter ue un empleado, prepara más detalles. im. de tercero un número de identificación riene que completar an declaro que he examinado esta | n personal (PIN) o | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en | nablar con el | IRS. |
| 200 | Si. Non telét desi Selec No. 53 Firme Bajo pena de correcta y cor Firme su nombre aquí | rmitir ques para inbre y nifono del ignado eccione eccione eccione perjurio, inpleta. La | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación comunication que he examinado esta a declaración del preparador (cu | n personal (PIN) o | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto lyente) está basada en toda in Escriba su nombre en letra de molde aquí Escriba su cargo en letra de molde aquí Mejor núm, de teléfono | hablar con el y luego FIRM s, y que, a mi la formación de la William De Presidente | IRS |
| () | ZDesea per instruccione Si. Non telé desi Sele No. Si: Firme Bajo pena de correcta y | rmitir ques para inbre y nifono del ignado eccione e aquí. I perjurio, impleta. La | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación un número de identificación del preparador (cual declaración del preparador (cual del del del del del del del del del de | n personal (PIN) on bas páginas de planilla, incluyendo se no sea el contribu | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en letra de molde aqui Escriba su cargo en letra de molde aqui Mejor núm, de teléfons llamarlo durante el dia | hablar con el y luego FIRM s, y que, a mi le formación de la William Di | IRS. |
| | ZDesea per instruccione Si. Non telé desi Sele No. Si: Firme Bajo pena de correcta y | rmitir ques para inbre y nifono del ignado eccione e aquí. I perjurio, impleta. La | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación comunication que he examinado esta a declaración del preparador (cu | n personal (PIN) on bas páginas de planilla, incluyendo se no sea el contribu | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en letra de molde aqui Escriba su cargo en letra de molde aqui Mejor núm, de teléfons llamarlo durante el dia | hablar con el y luego FIRM s, y que, a mi le formación de la William Di | IRS |
| (| ¿Desea per instruccione Si. Non teléf desi Sele No. 53 Firme Bajo pena de correcta y | rmitir ques para inbre y nifono del ignado eccione e aquí. I perjurio, impleta. La | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación un número de identificación del preparador (cual declaración del preparador (cual del del del del del del del del del de | n personal (PIN) on bas páginas de planilla, incluyendo se no sea el contribu | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en letra de molde aqui Escriba su cargo en letra de molde aqui Mejor núm, de teléfons llamarlo durante el dia | hablar con el y luego FIRM s, y que, a mi le formación de la William Di Presidente o donde | IRS. |
| | ¿Desea per instruccione Si. Non teléf desi Sele No. Si: Firme Bajo pena de correcta y cor Firme su nombre aquí Fecha ra uso excl | rmitir ques para inbre y nifono del ignado eccione e aquí. I perjurio, impleta. La | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación un número de identificación del preparador (cual declaración del preparador (cual del del del del del del del del del de | n personal (PIN) on bas páginas de planilla, incluyendo se no sea el contribu | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en letra de molde aqui Escriba su cargo en letra de molde aqui Mejor núm, de teléfons llamarlo durante el dia | hablar con el y luego FIRM s, y que, a mi le formación de la William Di | IRS. |
| (| ¿Desea per instruccione Si. Non telét desi Selet. No. Si. Firme Bajo pena de correcta y correct | rmitir ques para inbre y nifono del ignado eccione e aquí. I perjurio, impleta. La | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación un número de identificación del preparador (cual declaración del preparador (cual del del del del del del del del del de | n personal (PIN) on bas páginas de planilla, incluyendo se no sea el contribu | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en letra de molde aqui Escriba su cargo en letra de molde aqui Mejor núm, de teléfons llamarlo durante el dia | hablar con el y luego FIRM s, y que, a mi le formación de la William Di Presidente o donde | IRS. |
| () | ¿Desea per instruccione Si. Non telét desi Selet No. Si. Firme Bajo pena de correcta y correcta | rmitir ques para inbre y nifono del gnado eccione e aquí. Perjurio, impleta. La usivo di mipresa | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación un número de identificación del preparador (cual declaración del preparador (cual del del del del del del del del del de | n personal (PIN) on bas páginas de planilla, incluyendo se no sea el contribu | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en letra de molde aqui Escriba su cargo en letra de molde aqui Mejor núm, de teléfons llamarlo durante el dia | hablar con el y luego FIRM s, y que, a mi le formación de la William De Presidente o donde | IRS. |
| | ¿Desea per instruccione Si. Non telés desi Seles No. Si. Firme Bajo pena de correcta y cor Firme su nombre aquí Fecha ara uso excl Nombre del preparador Firma del preparador | rmitir ques para inbre y nifono del gnado eccione e aquí. Perjurio, impleta. La usivo di mipresa | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación un número de identificación del preparador (cual declaración del preparador (cual del del del del del del del del del de | n personal (PIN) on bas páginas de planilla, incluyendo se no sea el contribu | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en letra de molde aqui Escriba su cargo en letra de molde aqui Mejor núm, de teléfons llamarlo durante el dia | hablar con el y luego FIRM s, y que, a mi le formación de la William De Presidente o donde | IRS. |
| (| ¿Desea per instruccione Si. Non telét desi Selet. No. Si. Firme Bajo pena de correcta y cor Firme su nombre aquí Fecha ara uso excl. Nombre del preparador Firma del preparador Nombre de la et o et suvo, si tro et suvo, si tro | rmitir ques para inbre y nifono del gnado eccione e aquí. Perjurio, impleta. La usivo di mipresa | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación un número de identificación del preparador (cual declaración del preparador (cual del del del del del del del del del de | n personal (PIN) on bas páginas de planilla, incluyendo se no sea el contribu | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en letra de molde aqui Escriba su cargo en letra de molde aqui Mejor núm, de teléfons llamarlo durante el dia | hablar con el y luego FIRM s, y que, a mi le formación de la William D Presidente o donde sted trabaja p PTIN Fecha EIN Núm, de | IRS. |
| artic | ¿Desea per instruccione Si. Non telét desi Selet. No. Si. Firme Bajo pena de correcta y cor Firme su nombre aquí Fecha ara uso excl. Nombre del preparador Firma del preparador Nombre de la et o et suvo, si tro et suvo, si tro | rmitir ques para inbre y nifono del gnado eccione e aquí. Perjurio, impleta. La usivo di mipresa | comunicarnos con su ter un empleado, preparar más detalles. im. de tercero un número de identificación un número de identificación un número de identificación del preparador (cual declaración del preparador (cual del del del del del del del del del de | n personal (PIN) on bas páginas de planilla, incluyendo se no sea el contribu | de 5 digitos que usará al lel Formulario 941-PR y los anexos e informes adjunto yente) está basada en toda in Escriba su nombre en letra de molde aqui Escriba su cargo en letra de molde aqui Mejor núm, de teléfons llamarlo durante el dia | hablar con el / luego FIRM s, y que, a mi le formación de la William De Presidente o donde sted trabaja p PTIN Fecha EIN | IRS. |

U.S. Postal Service. Case:16-09134-ESL11 CD0c#:1 EFiled:11/17/16 EEntered:11/17/16 19:02:31 Desc: Main Domestic MDocumentum Pager 58 of 589 1 DGDENy UT 84409 20 1009 Politico Q 55 \$0.00 Certified For E000 \$0.00 Return Receipt Fee (Endorsement Required) \$0.00 (Late Restricted Delivery Fee (Endorsement Required) 570 40.4 11/04/2016 \$5.47 INTERNA REVENE DENICE TIUL Street, Api, No. Po Box 409101 COOK STORE STP-4 OCTOPY, UT 84409