

B1 (Official Form 1) (04/13)

<b>United States Bankruptcy Court SOUTHERN DISTRICT OF TEXAS BROWNSVILLE DIVISION</b>		<b>Voluntary Petition</b>
Name of Debtor (if individual, enter Last, First, Middle): <b>Rodriguez Hand Rehabilitation Center &amp; Physical Therapy, Inc.</b>		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): <b>74-2620208</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State): <b>2390 Central Blvd., Ste. Q Brownsville, TX</b>		Street Address of Joint Debtor (No. and Street, City, and State):
ZIP CODE <b>78520</b>		ZIP CODE
County of Residence or of the Principal Place of Business: <b>Cameron</b>		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <b>2390 Central Blvd., Ste. Q Brownsville, TX</b>		Mailing Address of Joint Debtor (if different from street address):
ZIP CODE <b>78520</b>		ZIP CODE
Location of Principal Assets of Business Debtor (if different from street address above):		ZIP CODE
<b>Type of Debtor</b> (Form of Organization) (Check one box.)  <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<b>Nature of Business</b> (Check one box.) <input checked="" type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:	<b>Tax-Exempt Entity</b> (Check box, if applicable.)  <input type="checkbox"/> Debtor is a tax-exempt organization under title 26 of the United States Code (the Internal Revenue Code).	<b>Nature of Debts</b> (Check one box.)  <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.
<b>Filing Fee</b> (Check one box.) <input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Check one box: Chapter 11 Debtors</b> <input checked="" type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

<p><b>Voluntary Petition</b> (This page must be completed and filed in every case.)</p>		<p>Name of Debtor(s): <b>Rodriguez Hand Rehabilitation Center &amp; Physical Therapy, Inc.</b></p>	
<p><b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)</p>			
Location Where Filed:	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<p><b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)</p>			
Name of Debtor:	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<p style="text-align: center;"><b>Exhibit A</b></p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input checked="" type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<p style="text-align: center;"><b>Exhibit B</b></p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <p style="text-align: center;"><b>X</b> _____</p> <p style="text-align: right;">Date</p>	
<p><b>Exhibit C</b></p> <p>Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.</p> <p><input checked="" type="checkbox"/> No.</p>			
<p><b>Exhibit D</b></p> <p>(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input type="checkbox"/> Exhibit D, completed and signed by the debtor, is attached and made a part of this petition.</p> <p>If this is a joint petition:</p> <p><input type="checkbox"/> Exhibit D, also completed and signed by the joint debtor, is attached and made a part of this petition.</p>			
<p><b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)</p> <p><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.</p>			
<p><b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)</p> <p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">(Name of landlord that obtained judgment)</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">(Address of landlord)</p> <p><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and</p> <p><input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).</p>			

<p><b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): <b>Rodriguez Hand Rehabilitation Center &amp; Physical Therapy, Inc.</b></p>
<b>Signatures</b>	
<p><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.                  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.                  [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X</b> _____                  _____                  _____</p> <p>Telephone Number (If not represented by attorney)                  _____</p> <p>Date                  _____</p>	<p><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p><b>X</b> _____                  (Signature of Foreign Representative)</p> <p>_____                  (Printed Name of Foreign Representative)</p> <p>_____                  Date</p>
<p style="text-align: center;"><b>Signature of Attorney*</b></p> <p><b>X</b> <u>/s/ EDUARDO V. RODRIGUEZ</u>  <b>EDUARDO V. RODRIGUEZ</b> Bar No. <b>00795621</b></p> <p><b>Malaise Law Firm</b>  <b>1265 N. Expressway 83</b>  <b>Brownsville, TX 78520</b></p> <p>Phone No. <b>(956) 547-9638</b> Fax No. <b>(956) 547-9630</b></p> <p><u>11/1/2013</u>                  Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;"><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____                  Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____                  Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____                  Address</p> <p><b>X</b> _____                  _____                  Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</small></p>
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>Rodriguez Hand Rehabilitation Center &amp; Physical Therapy, Inc.</b></p> <p><b>X</b> <u>/s/ Carlos C. Rodriguez, Jr.</u>                  Signature of Authorized Individual</p> <p><b>Carlos C. Rodriguez, Jr.</b>                  Printed Name of Authorized Individual</p> <p><b>Shareholder / Secretary</b>                  Title of Authorized Individual</p> <p><u>11/1/2013</u>                  Date</p>	

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

IN RE: **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

CASE NO

CHAPTER 11

**EXHIBIT "A" TO VOLUNTARY PETITION**

1. Debtor's employer identification number is <u>74-2620208</u> .		
2. If any of debtor's securities are registered under section 12 of the Securities and Exchange Act of 1934, the SEC file number is _____.		
3. The following financial data is the latest available information and refers to the debtor's condition on <u>10/30/2013</u> .		
a. Total Assets	<b>\$156,625.15</b>	
b. Total Liabilities	<b>\$204,876.46</b>	
<b>Secured debt</b>	<b>Amounts</b>	<b>Approximate number of holders</b>
Fixed, liquidated secured debt	<b>\$136,876.46</b>	<b>7</b>
Contingent secured debt	<b>\$0.00</b>	<b>0</b>
Disputed secured debt	<b>\$0.00</b>	<b>0</b>
Unliquidated secured debt	<b>\$0.00</b>	<b>0</b>
<b>Unsecured debt</b>	<b>Amounts</b>	<b>Approximate number of holders</b>
Fixed, liquidated unsecured debt	<b>\$68,000.00</b>	<b>2</b>
Contingent unsecured debt	<b>\$0.00</b>	<b>0</b>
Disputed unsecured debt	<b>\$0.00</b>	<b>0</b>
Unliquidated unsecured debt	<b>\$0.00</b>	<b>0</b>
<b>Stock</b>	<b>Amounts</b>	<b>Approximate number of holders</b>
Number of shares of preferred stock		
Number of shares of common stock	<b>100</b>	<b>2</b>
<b>Comments, if any</b>		
4. Brief description of debtor's business: <i>Hand Rehabilitation; Occupational Therapy; Physical Therapy</i>		

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

IN RE: **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

CASE NO

CHAPTER **11**

**EXHIBIT "A" TO VOLUNTARY PETITION**

*Continuation Sheet No. 1*

5. List the name of any person who directly or indirectly owns, controls, or holds, with power to vote, 20% or more of the voting securities of the debtor:

*Carlos C. Rodriguez, Jr. - 50%*  
*Rosa C. Rodriguez - 50%*

6. List the name of all corporations 20% or more of the outstanding voting securities of which are directly or indirectly owned, controlled, or held, with power to vote, by debtor:

I, **Carlos C. Rodriguez, Jr.**, the **Shareholder / Secretary** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing Exhibit "A" to Voluntary Petition, and that it is true and correct to the best of my information and belief.

Date: **11/1/2013**

Signature: */s/ Carlos C. Rodriguez, Jr.*  
**Carlos C. Rodriguez, Jr.**  
**Shareholder / Secretary**

## Rodriguez Hand Rehabilitation Cent Physical Therapy, Inc.

**STATEMENT OF ASSETS, LIABILITIES & EQUITY****INCOME TAX BASIS**

As of September 30, 2013

**ASSETS****CURRENT ASSETS**

Cash-Compass Bank	\$	11,339.87	
Accounts receivable-patients		12,598.73	
Accounts receivable-officers		<u>53,003.47</u>	
<b>Total Current Assets</b>	\$		<b>76,942.07</b>

**PROPERTY AND EQUIPMENT**

Land	\$	75,000.00	
Building & improvements		133,995.98	
Landscaping		1,938.29	
Office furniture & equipment		32,979.74	
Physical therapy equipment		<u>40,507.31</u>	
		284,421.32	
Less: Accumulated Depreciation		<u>(100,843.68)</u>	
<b>Net Property and Equipment</b>			<b>183,577.64</b>

**OTHER ASSETS**

Deposits-Utilities	\$	<u>1,050.00</u>	
<b>Total Other Assets</b>			<b><u>1,050.00</u></b>

**TOTAL ASSETS****\$ 261,569.71**

## Rodriguez Hand Rehabilitation Cent Physical Therapy, Inc.

**STATEMENT OF ASSETS, LIABILITIES & EQUITY****INCOME TAX BASIS**

As of September 30, 2013

**LIABILITIES & STOCKHOLDERS' EQUITY****CURRENT LIABILITIES**

Accounts payable-TWC taxes	\$	266.70	
Accts pay-prior year payroll taxes		41,594.49	
Accrued current payroll taxes		5,604.94	
Federal income tax-prior years		33,018.65	
Federal income tax-current year		9,045.34	
Deferred income		12,598.73	
Notes due within one year		<u>6,500.00</u>	
<b>Total Current Liabilities</b>	\$		108,628.85

**LONG-TERM LIABILITIES**

N/P-Compass Bank #2453	\$	<u>92,015.19</u>	
		92,015.19	
Notes due within one year		<u>(6,500.00)</u>	
<b>Total Long-Term Liabilities</b>			85,515.19

**STOCKHOLDERS' EQUITY**

Capital stock	\$	33,500.00	
Retained earnings		17,127.19	
Year to date profit (loss)		<u>16,798.48</u>	
<b>Total Stockholders' Equity</b>			<u>67,425.67</u>

<b>TOTAL LIABILITIES &amp; STOCKHOLDERS' EQUITY</b>	\$		<u><u>261,569.71</u></u>
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**Rodriguez Hand Rehabilitation Cent Physical Therapy, Inc.**  
**STATEMENT OF REVENUES & EXPENSES**  
**INCOME TAX BASIS**

	3 Months Ended		9 Months Ended	
	<u>September 30, 2013</u>	%	<u>September 30, 2013</u>	%
<b>Income From Revenues</b>				
Income-fees	\$ 44,280.93	100.00	\$ 113,428.86	100.00
<b>Total Revenues</b>	<u>44,280.93</u>	<u>100.00</u>	<u>113,428.86</u>	<u>100.00</u>
<b>Expenses</b>				
Auto expense	\$ 0.00	0.00	\$ 272.83	0.24
Bank charges	129.00	0.29	1,377.00	1.21
Billing expense	81.13	0.18	982.18	0.87
Contract labor	0.00	0.00	819.34	0.72
Depreciation	16.80	0.04	3,599.30	3.17
Dues & subscriptions	0.00	0.00	430.00	0.38
Employee expense	329.84	0.74	329.84	0.29
Insurance-general	0.00	0.00	150.00	0.13
Insurance-auto	2,092.04	4.72	5,077.60	4.48
Insurance-prof liability	1,786.00	4.03	1,786.00	1.57
Legal & accounting	800.00	1.81	1,600.00	1.41
Licenses & permits	0.00	0.00	74.00	0.07
Mileage expense	0.00	0.00	12.50	0.01
Office supplies	1,709.20	3.86	2,761.77	2.43
Rent expense	2,599.00	5.87	5,227.00	4.61
Repairs & maint. bldg/eqpt	326.92	0.74	435.30	0.38
Software maintenance & suppo	162.42	0.37	162.42	0.14
Supplies-other	64.22	0.15	64.22	0.06
Taxes-payroll	1,395.03	3.15	3,919.36	3.46
Taxes-other	2,260.44	5.10	2,260.44	1.99
Telephone	669.80	1.51	2,933.31	2.59
Utilities	2,896.98	6.54	6,199.34	5.47
Wages-officers	11,100.00	25.07	31,845.81	28.08
Wages-other	6,283.01	14.19	15,265.48	13.46
<b>Total Expenses</b>	<u>34,701.83</u>	<u>78.37</u>	<u>87,585.04</u>	<u>77.22</u>
<b>Net operating income</b>	9,579.10	21.63	25,843.82	22.78
<b>Net Income before taxes</b>	9,579.10	21.63	25,843.82	22.78
<b>Federal income taxes</b>	<u>3,352.69</u>	<u>7.57</u>	<u>9,045.34</u>	<u>7.97</u>
<b>Net Income (Loss)</b>	<u>\$ 6,226.41</u>	<u>14.06</u>	<u>\$ 16,798.48</u>	<u>14.81</u>

"See Accountants' Compilation Report"



1120

U.S. Corporation Income Tax Return

OMB No. 1545-0123

For calendar year 2012 or tax year beginning , ending

Information about Form 1120 and its separate instructions is at www.irs.gov/form1120.

2012

Form Department of the Treasury Internal Revenue Service

A Check if:

- 1a Consolidated return (attach Form 851)
b Life/nonlife consolidated return
2 Personal holding co. (attach Sch. PH)
3 Personal service corp. (see instructions)
4 Schedule M-3 attached

Name: Rodriguez Hand Rehabilitation & Physical Therapy, Inc.
Number, street, and room or suite no. If a P.O. box, see instructions. City or town, state, and ZIP code: 2390 CENTRAL BLVD, SUITE Q BROWNSVILLE TX 78520

B Employer identification number: 74-2620208
C Date incorporated: 12/16/1991
D Total assets (see instructions): \$ 486,268

E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change

Income section table with rows 1a-11. Total income: 141,480

Deductions section table with rows 12-29c. Total deductions: 126,250

Tax, Refundable Credits, and Payments section table with rows 30-36. Amount owed: 5,427

Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Paid Preparer Use Only: Print/Type preparer's name: Fernando Terrones; Date: 08/13/13; Firm's name: De La Rosa & Company, CPA's; Firm's address: 3401 Old Hwy 77 Ste B Brownsville, TX 78520

<b>Schedule C Dividends and Special Deductions (see instructions)</b>		(a) Dividends received	(b) %	(c) Special deductions (a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		70	
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		80	
3	Dividends on debt-financed stock of domestic and foreign corporations		see instructions	
4	Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6	Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8	Dividends from wholly owned foreign subsidiaries		100	
9	<b>Total.</b> Add lines 1 through 8. See instructions for limitation			
10	Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11	Dividends from affiliated group members		100	
12	Dividends from certain FSCs		100	
13	Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12			
14	Income from controlled foreign corporations under subpart F (attach Form(s) 5471)			
15	Foreign dividend gross-up			
16	IC-DISC and former DISC dividends not included on lines 1, 2, or 3			
17	Other dividends			
18	Deduction for dividends paid on certain preferred stock of public utilities			
19	<b>Total dividends.</b> Add lines 1 through 17. Enter here and on page 1, line 4			
20	<b>Total special deductions.</b> Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b			

**Schedule J Tax Computation and Payment** (see instructions)

**Part I—Tax Computation**

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))			
2	Income tax. Check if a qualified personal service corporation (see instructions)	<input checked="" type="checkbox"/>	2	5,331
3	Alternative minimum tax (attach Form 4626)		3	
4	Add lines 2 and 3		4	5,331
5a	Foreign tax credit (attach Form 1118)		5a	
b	Credit from Form 8834, line 30 (attach Form 8834)		5b	
c	General business credit (attach Form 3800)		5c	
d	Credit for prior year minimum tax (attach Form 8827)		5d	
e	Bond credits from Form 8912		5e	
6	<b>Total credits.</b> Add lines 5a through 5e		6	0
7	Subtract line 6 from line 4		7	5,331
8	Personal holding company tax (attach Schedule PH (Form 1120))		8	
9a	Recapture of investment credit (attach Form 4255)		9a	
b	Recapture of low-income housing credit (attach Form 8611)		9b	
c	Interest due under the look-back method—completed long-term contracts (attach Form 8697)		9c	
d	Interest due under the look-back method—income forecast method (attach Form 8866)		9d	
e	Alternative tax on qualifying shipping activities (attach Form 8902)		9e	
f	Other (see instructions—attach statement)		9f	
10	<b>Total.</b> Add lines 9a through 9f		10	
11	<b>Total tax.</b> Add lines 7, 8, and 10. Enter here and on page 1, line 31		11	5,331

**Part II—Payments and Refundable Credits**

12	2011 overpayment credited to 2012		12	
13	2012 estimated tax payments		13	
14	2012 refund applied for on Form 4466		14	
15	Combine lines 12, 13, and 14		15	
16	Tax deposited with Form 7004		16	
17	Withholding (see instructions)		17	
18	<b>Total payments.</b> Add lines 15, 16, and 17		18	
19	Refundable credits from:			
a	Form 2439		19a	
b	Form 4136		19b	
c	Form 8827, line 8c		19c	
d	Other (attach statement—see instructions)		19d	
20	<b>Total credits.</b> Add lines 19a through 19d		20	
21	<b>Total payments and credits.</b> Add lines 18 and 20. Enter here and on page 1, line 32		21	

**Schedule K Other Information** (see instructions)

1	Check accounting method: a <input checked="" type="checkbox"/> Cash b <input type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶	Yes	No
2	See the instructions and enter the:		
a	Business activity code no. ▶ <b>621340</b>		
b	Business activity ▶ <b>Health services</b>		
c	Product or service ▶ <b>Physical therapy</b>		
3	Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter name and EIN of the parent corporation ▶		<b>X</b>
4	At the end of the tax year:		
a	Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G)		<b>X</b>
b	Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G)	<b>X</b>	

**Schedule K Other Information** continued (see instructions)

**5** At the end of the tax year, did the corporation:

**a** Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on **Form 851**, Affiliations Schedule? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below.

Yes	No
	<b>X</b>

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

**b** Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below.

Yes	No
	<b>X</b>

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

**6** During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.)  
 If "Yes," file **Form 5452**, Corporate Report of Nondividend Distributions.  
 If this is a consolidated return, answer here for the parent corporation and on **Form 851** for each subsidiary.

Yes	No
	<b>X</b>

**7** At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of the corporation's stock entitled to vote or (b) the total value of all classes of the corporation's stock?  
 For rules of attribution, see section 318. If "Yes," enter:

Yes	No
	<b>X</b>

(i) Percentage owned ▶ \_\_\_\_\_ and (ii) Owner's country ▶ \_\_\_\_\_  
 (c) The corporation may have to file **Form 5472**, Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶ \_\_\_\_\_

**8** Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶   
 If checked, the corporation may have to file **Form 8281**, Information Return for Publicly Offered Original Issue Discount Instruments.

**9** Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ 0

**10** Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶ 2

**11** If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here ▶   
 If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.

**12** Enter the available NOL carryover from prior tax years (do not reduce it by any deduction on line 29a.) ▶ \$ \_\_\_\_\_

**13** Are the corporation's total receipts (line 1c plus lines 4 through 10 on page 1) for the tax year and its total assets at the end of the tax year less than \$250,000?

If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2 on page 5. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year ▶ \$ \_\_\_\_\_

**14** Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement (see instructions)?   
 If "Yes," complete and attach Schedule UTP.

**15a** Did the corporation make any payments in 2012 that would require it to file Form(s) 1099?

**b** If "Yes," did or will the corporation file all required Forms 1099?

**16** During this tax year, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock?

**17** During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction?

**18** Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		5,312		-3,921
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (att. stmt.) <b>Stmt 2</b>		99,505		99,505
7	Loans to shareholders		214,441		202,458
8	Mortgage and real estate loans				
9	Other investments (attach stmt.)				
10a	Buildings and other depreciable assets	239,150		225,211	
b	Less accumulated depreciation	123,800	115,350	113,035	112,176
11a	Depletable assets				
b	Less accumulated depletion				
12	Land (net of any amortization)		75,000		75,000
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization				
14	Other assets (attach stmt.) <b>Stmt 3</b>		1,050		1,050
15	<b>Total assets</b>		<b>510,658</b>		<b>486,268</b>
<b>Liabilities and Shareholders' Equity</b>					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year		6,000		6,500
18	Other current liabilities (att. stmt.) <b>Stmt 4</b>		106,582		88,626
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more		94,296		90,515
21	Other liabilities (attach statement)				
22	Capital stock: a Preferred stock				
	b Common stock	33,500	33,500	33,500	33,500
23	Additional paid-in capital				
24	Retained earnings—Appropriated (att. stmt.)				
25	Retained earnings—Unappropriated		270,280		267,127
26	Adjustments to SH equity (att. stmt.)				
27	Less cost of treasury stock				
28	<b>Total liabilities and shareholders' equity</b>		<b>510,658</b>		<b>486,268</b>

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return**

Note: Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more – see instructions

1	Net income (loss) per books	-3,152	7	Income recorded on books this year not included on this return (itemize):	
2	Federal income tax per books	5,330		Tax-exempt interest \$	
3	Excess of capital losses over capital gains				
4	Income subject to tax not recorded on books this year (itemize):		8	Deductions on this return not charged against book income this year (itemize):	
5	Expenses recorded on books this year not deducted on this return (itemize):		a	Depreciation \$	
a	Depreciation \$		b	Charitable contributions \$	
b	Charitable contributions \$				
c	Travel and entertainment \$		9	Add lines 7 and 8	
	<b>Stmt 5 13,052</b>	<b>13,052</b>	10	Income (page 1, line 28)—line 6 less line 9	15,230
6	Add lines 1 through 5	15,230			

**Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)**

1	Balance at beginning of year	270,280	5	Distributions: a Cash	
2	Net income (loss) per books	-3,152		b Stock	
3	Other increases (itemize):			c Property	
			6	Other decreases (itemize): <b>Stmt 6</b>	1
			7	Add lines 5 and 6	1
4	Add lines 1, 2, and 3	267,128	8	Balance at end of year (line 4 less line 7)	267,127

**SCHEDULE G  
(Form 1120)**  
(Rev. December 2011)  
Department of the Treasury  
Internal Revenue Service

**Information on Certain Persons Owning the  
Corporation's Voting Stock**

OMB No. 1545-0123

▶ Attach to Form 1120.  
▶ See instructions on page 2.

Name <b>Rodriguez Hand Rehabilitation &amp;</b>	Employer identification number (EIN) <b>74-2620208</b>
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**Part I** **Certain Entities Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4a). Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Percentage Owned in Voting Stock

**Part II** **Certain Individuals and Estates Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4b). Complete columns (i) through (iv) below for any individual or estate that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Percentage Owned in Voting Stock
<b>Carlos Rodriguez</b>	<b>455-02-9497</b>	<b>U.S.A.</b>	<b>50.000</b>
<b>Rosa C. Rodriguez</b>	<b>467-94-3378</b>	<b>U.S.A.</b>	<b>50.000</b>

B6A (Official Form 6A) (12/07)

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE A - REAL PROPERTY**

Description and Location of Property	Nature of Debtor's Interest in Property	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
Business Property Lot Four (4), Block Twenty (20), TREASURE HILLS SUBDIVISION, UNIT NO. II, City of Harlingen, Cameron County, Texas, according to Map or Plat of said Subdivision thereof, recorded in Volume 17, Page 40, Map Records of Cameron County, Texas; further described as: 2119 Haine Dr., Harlingen, TX 78550	Fee Simple	\$148,000.00	\$136,551.19

**Total: \$148,000.00**

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE B - PERSONAL PROPERTY**

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.	<b>X</b>		
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		Business Checking Account # xx4737 at BBVA Compass, styled: Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.	\$2,055.15
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>		
4. Household goods and furnishings, including audio, video and computer equipment.	<b>X</b>		
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>X</b>		
6. Wearing apparel.	<b>X</b>		
7. Furs and jewelry.	<b>X</b>		
8. Firearms and sports, photographic, and other hobby equipment.	<b>X</b>		
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<b>X</b>		
10. Annuities. Itemize and name each issuer.	<b>X</b>		



B6B (Official Form 6B) (12/07) -- Cont.

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 1

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	<b>X</b>		
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	<b>X</b>		
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>		
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>		
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	<b>X</b>		
16. Accounts receivable.		Accounts Receivable	\$12,598.73
		Insider Loan	\$53,003.47
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>		
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<b>X</b>		

B6B (Official Form 6B) (12/07) -- Cont.

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE B - PERSONAL PROPERTY**

*Continuation Sheet No. 2*

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>		
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>		
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>		
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>		
23. Licenses, franchises, and other general intangibles. Give particulars.		Texas State Board of Physical Therapy Examiners Registration No. xx3501	\$0.00
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>		
25. Automobiles, trucks, trailers, and other vehicles and accessories.	<b>X</b>		

B6B (Official Form 6B) (12/07) -- Cont.

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 3

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
26. Boats, motors, and accessories.	<b>X</b>		
27. Aircraft and accessories.	<b>X</b>		
28. Office equipment, furnishings, and supplies.		Furniture, Fixtures & Inventory for business location - 2119 Haine Dr., Harlingen, TX 78550	\$3,285.00
		Furniture, Fixtures & Inventory for business location - 2390 Central Blvd., Ste. Q, Brownsville, TX 78520	\$3,285.00
29. Machinery, fixtures, equipment, and supplies used in business.	<b>X</b>		
30. Inventory.	<b>X</b>		
31. Animals.	<b>X</b>		
32. Crops - growing or harvested. Give particulars.	<b>X</b>		
33. Farming equipment and implements.	<b>X</b>		
34. Farm supplies, chemicals, and feed.	<b>X</b>		
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>		

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

3 continuation sheets attached

**Total >**

**\$74,227.35**

B6C (Official Form 6C) (4/13)

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

- 11 U.S.C. § 522(b)(2)
- 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675.\*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Not Applicable			
		<b>\$0.00</b>	<b>\$0.00</b>

\* Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6D (Official Form 6D) (12/07)

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.** Case No. \_\_\_\_\_  
 (if known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBETOR	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: xxxx xxxx xxxx 0598 Cameron County Tax Office Tony Yzaguirre, Jr. Tax Assessor-Collector P.O. Box 952 Brownsville, TX 78522-0952		DATE INCURRED: 2011-13 NATURE OF LIEN: <b>Statutory Tax Lien</b> COLLATERAL: Furniture, Fixtures & Inventory for business locat REMARKS:  VALUE: <b>\$3,285.00</b>				<b>\$198.47</b>	
ACCT #: xxxx xxxx xxxx 0799 Cameron County Tax Office Tony Yzaguirre, Jr. Tax Assessor-Collector P.O. Box 952 Brownsville, TX 78522-0952		DATE INCURRED: 2011-2013 NATURE OF LIEN: <b>Statutory Tax Lien</b> COLLATERAL: Furniture, Fixtures & Inventory for business locat REMARKS:  VALUE: <b>\$3,285.00</b>				<b>\$67.45</b>	
ACCT #: xxxxxxxxxxxx4000 Cameron County Tax Office Tony Yzaguirre, Jr. Tax Assessor-Collector P.O. Box 952 Brownsville, TX 78522-0952		DATE INCURRED: 2013 NATURE OF LIEN: <b>Statutory Tax Lien</b> COLLATERAL: <b>Business Property</b> REMARKS:  VALUE: <b>\$148,000.00</b>				<b>\$481.07</b>	
ACCT #: xxxx-xxxx-xxxx-0799 Harlingen Tax Office 305 E. Jackson St., Suite 102 P.O. Box 2643 Harlingen, TX 78551-2643		DATE INCURRED: 2013 NATURE OF LIEN: <b>STATUTORY LIEN</b> COLLATERAL: Inventory, Furniture & Fixtures at business locate REMARKS:  VALUE: <b>\$3,285.00</b>				<b>\$59.35</b>	
<b>Subtotal (Total of this Page) &gt;</b>						<b>\$806.34</b>	<b>\$0.00</b>
<b>Total (Use only on last page) &gt;</b>							

1 continuation sheets attached

(Report also on Summary of Schedules.)  
 (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6D (Official Form 6D) (12/07) - Cont.

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.** Case No. \_\_\_\_\_  
 (if known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: xxxxxxxxxxxx4000  Harlingen Tax Office P.O. Box 2643 Harlingen, TX 78551-2643		DATE INCURRED: <b>2013</b> NATURE OF LIEN: <b>Statutory Tax Lien</b> COLLATERAL: <b>Business Property</b> REMARKS:  VALUE: <b>\$148,000.00</b>				<b>\$1,543.12</b>	
ACCT #: xxxxxx2664  RREF CB SBL II Acquisitions, LLC c/o Quantum Servicing 6302 E. Martin Luther King Blvd. Suite 300 Tampa, FL 33619	X	DATE INCURRED: <b>5-5-2006</b> NATURE OF LIEN: <b>Deed of Trust and Note</b> COLLATERAL: <b>Business Property</b> REMARKS: <b>Arrears: \$24,527.00 - 14-months</b>  VALUE: <b>\$148,000.00</b>				<b>\$110,000.00</b>	
Representing: RREF CB SBL II Acquisitions, LLC		Matt Crockett Gardere, Attorneys and Counselors 3000 Thanksgiving Tower 1601 Elm Street Dallas, TX 75201-4761				<b>Notice Only</b>	<b>Notice Only</b>
ACCT #:  RREF CB SBL II Acquisitions, LLC c/o Quantum Servicing 6302 E. Martin Luther King Blvd. Suite 300 Tampa, FL 33619		DATE INCURRED: NATURE OF LIEN: <b>Arrearage Claim</b> COLLATERAL: <b>Business Property</b> REMARKS:  VALUE: <b>\$148,000.00</b>				<b>\$24,527.00</b>	

Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Secured Claims

<b>Subtotal (Total of this Page) &gt;</b>	<b>\$136,070.12</b>	<b>\$0.00</b>
<b>Total (Use only on last page) &gt;</b>	<b>\$136,876.46</b>	<b>\$0.00</b>

(Report also on Summary of Schedules.)	(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)
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B6E (Official Form 6E) (04/13)

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**Case No. \_\_\_\_\_  
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS** Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

 **Administrative allowances under 11 U.S.C. Sec. 330**

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

B6E (Official Form 6E) (04/13) - Cont.

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(If Known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

TYPE OF PRIORITY Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: <b>xx-xxx0208</b> <b>Internal Revenue Service</b> <b>Insolvency Section 5</b> <b>300 E. 8th Street, MAIL STOP 5022 AUS</b> <b>Austin, TX 78701</b>		DATE INCURRED: <b>07; 08-12</b> CONSIDERATION: <b>941 and 1120 taxes</b> REMARKS:				<b>\$68,000.00</b>	<b>\$68,000.00</b>	<b>\$0.00</b>

Sheet no. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims	<b>Subtotals (Totals of this page) &gt;</b>	<b>\$68,000.00</b>	<b>\$68,000.00</b>	<b>\$0.00</b>
<b>Total &gt;</b> (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)		<b>\$68,000.00</b>		
<b>Totals &gt;</b> (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)			<b>\$68,000.00</b>	<b>\$0.00</b>



B6F (Official Form 6F) (12/07)

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
<b>Subtotal &gt;</b>						<b>\$0.00</b>
<b>Total &gt;</b>						<b>\$0.00</b>

No continuation sheets attached

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6G (Official Form 6G) (12/07)

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B6H (Official Form 6H) (12/07)

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<p><b>Carlos C. Rodriguez</b> P.O. Box 3605 Harlingen, TX 78551</p> <p><b>Rosa C. Rodriguez</b> P.O. Box 3605 Harlingen, TX 78551</p>	<p><b>RREF CB SBL II Acquisitions, LLC</b> c/o Quantum Servicing 6302 E. Martin Luther King Blvd. Suite 300 Tampa, FL 33619</p> <p><b>RREF CB SBL II Acquisitions, LLC</b> c/o Quantum Servicing 6302 E. Martin Luther King Blvd. Suite 300 Tampa, FL 33619</p>

B6 Summary (Official Form 6 - Summary) (12/07)

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No.

Chapter **11**

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER	
A - Real Property	Yes	1	\$148,000.00			
B - Personal Property	Yes	4	\$74,227.35			
C - Property Claimed as Exempt	No					
D - Creditors Holding Secured Claims	Yes	2			\$136,876.46	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2			\$68,000.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	1			\$0.00	
G - Executory Contracts and Unexpired Leases	Yes	1				
H - Codebtors	Yes	1				
I - Current Income of Individual Debtor(s)	No					N/A
J - Current Expenditures of Individual Debtor(s)	No					N/A
	TOTAL	12	\$222,227.35	\$204,876.46		

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_

(if known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

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### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the \_\_\_\_\_ **Shareholder / Secretary** \_\_\_\_\_ of the \_\_\_\_\_ **Corporation** \_\_\_\_\_ named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ **14** \_\_\_\_\_ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

(Total shown on summary page plus 1.)

Date 11/1/2013 \_\_\_\_\_

Signature /s/ Carlos C. Rodriguez, Jr. \_\_\_\_\_  
**Carlos C. Rodriguez, Jr.**  
**Shareholder / Secretary**

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

In re: **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

**1. Income from employment or operation of business**

None  State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the TWO YEARS immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>\$113,428.86</b>	<b>2013 year-to-date income</b>
<b>\$141,480.00</b>	<b>2012 total income, per 1120 Tax Return</b>
<b>\$191,374.00</b>	<b>2011 total income, per 1120 Tax Return</b>

**2. Income other than from employment or operation of business**

None  State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the TWO YEARS immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**3. Payments to creditors***Complete a. or b., as appropriate, and c.*

None  a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 DAYS immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None  b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 DAYS immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None  c. All debtors: List all payments made within ONE YEAR immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**4. Suits and administrative proceedings, executions, garnishments and attachments**

None  a. List all suits and administrative proceedings to which the debtor is or was a party within ONE YEAR immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None  b. Describe all property that has been attached, garnished or seized under any legal or equitable process within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

In re: **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**  
*Continuation Sheet No. 1*

**5. Repossessions, foreclosures and returns**

None  List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**6. Assignments and receiverships**

None  a. Describe any assignment of property for the benefit of creditors made within 120 DAYS immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None  b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**7. Gifts**

None  List all gifts or charitable contributions made within ONE YEAR immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**8. Losses**

None  List all losses from fire, theft, other casualty or gambling within ONE YEAR immediately preceding the commencement of this case OR SINCE THE COMMENCEMENT OF THIS CASE. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**9. Payments related to debt counseling or bankruptcy**

None  List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within ONE YEAR immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Malaise Law Firm 1265 North Expressway 83 Brownsville, TX 78520	October 25, 2013	\$2,000
	October 28, 2013	\$5,500
		\$5,761.25 applied to pre-petition fees and expenses;
		\$1,738.75 for retainer

**10. Other transfers**

None  a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within TWO YEARS immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None  b. List all property transferred by the debtor within TEN YEARS immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

In re: **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_

(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

*Continuation Sheet No. 2*

**11. Closed financial accounts**

None  List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within ONE YEAR immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**12. Safe deposit boxes**

None  List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**13. Setoffs**

None  List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 DAYS preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**14. Property held for another person**

None  List all property owned by another person that the debtor holds or controls.

**15. Prior address of debtor**

None  If the debtor has moved within THREE YEARS immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**16. Spouses and Former Spouses**

None  If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within EIGHT YEARS immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

**17. Environmental Information**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None  a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:



B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

In re: **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**  
*Continuation Sheet No. 3*

None  b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material.  
 Indicate the governmental unit to which the notice was sent and the date of the notice.

None  c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

None  a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within SIX YEARS immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

**NAME, ADDRESS, AND LAST FOUR DIGITS OF  
SOCIAL-SECURITY OR OTHER INDIVIDUAL  
TAXPAYER-I.D. NO. (ITIN) / COMPLETE EIN**

**NATURE OF BUSINESS**

**BEGINNING AND ENDING  
DATES**

**Rodriguez Hand Rehabilitation Center &  
Physical Therapy, Inc.  
1st location:  
2390 Central Blvd., Ste Q  
Brownsville, TX 78520**

**Physical Therapy; Occupational  
Therapy**

**1st location:  
February 1, 1990 to  
present**

**2nd location:  
2119 Haine Dr.  
Harlingen, TX 78550**

**2nd location:  
2001 to present**

**Fed ID No. 74-2620208**

None  b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

In re: **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_

(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

*Continuation Sheet No. 4*

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within SIX YEARS immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement ONLY if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

**19. Books, records and financial statements**

- None  a. List all bookkeepers and accountants who within TWO YEARS immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

**NAME AND ADDRESS**

**Zamora & Terrones**  
173 E. Price Rd.  
Brownsville, TX 78520

**DATES SERVICES RENDERED**

**1990-2010**

**Fernando Terrones**  
**De la Rosa & Co., CPA's**  
3401 Old Hwy 77 Ste. B  
Brownsville, TX 78520

**2010 to present**

- None  b. List all firms or individuals who within TWO YEARS immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

- None  c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

- None  d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within TWO YEARS immediately preceding the commencement of this case.

**NAME AND ADDRESS**

**Internal Revenue Service**  
1810 Haine Ave.  
Harlingen, TX 78550

**DATE ISSUED**

**September,**  
**2013**

**20. Inventories**

- None  a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

- None  b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

**21. Current Partners, Officers, Directors and Shareholders**

- None  a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

B7 (Official Form 7) (04/13)

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

In re: **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

Case No. \_\_\_\_\_

(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

*Continuation Sheet No. 5*

- None  b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
<b>Carlos C. Rodriguez, Jr.</b> P.O. Box 3605 Harlingen, TX 78551	<b>Owner/ Secretary</b>	<b>50%</b>
<b>Rosa C. Rodriguez</b> P.O. Box 3605 Harlingen, TX 78551	<b>Owner / President</b>	<b>50%</b>

**22. Former partners, officers, directors and shareholders**

- None  a. If the debtor is a partnership, list each member who withdrew from the partnership within ONE YEAR immediately preceding the commencement of this case.

- None  b. If the debtor is a corporation, list all officers or directors whose relationship with the corporation terminated within ONE YEAR immediately preceding the commencement of this case.

**23. Withdrawals from a partnership or distributions by a corporation**

- None  If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during ONE YEAR immediately preceding the commencement of this case.

**24. Tax Consolidation Group**

- None  If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within SIX YEARS immediately preceding the commencement of the case.

**25. Pension Funds**

- None  If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within SIX YEARS immediately preceding the commencement of the case.

*[If completed on behalf of a partnership or corporation]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date 11/1/2013

Signature /s/ Carlos C. Rodriguez, Jr.  
**Carlos C. Rodriguez, Jr.**  
**Shareholder / Secretary**

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF TEXAS  
BROWNSVILLE DIVISION**

IN RE: **Rodriguez Hand Rehabilitation Center & Physical Therapy, Inc.**

CASE NO

CHAPTER **11**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 11/1/2013

Signature /s/ Carlos C. Rodriguez, Jr.  
*Carlos C. Rodriguez, Jr.*  
*Shareholder / Secretary*

Date \_\_\_\_\_

Signature \_\_\_\_\_

Cameron County Tax Office  
Tony Yzaguirre, Jr.  
Tax Assessor-Collector  
P.O. Box 952  
Brownsville, TX 78522-0952

Carlos C. Rodriguez  
P.O. Box 3605  
Harlingen, TX 78551

Harlingen Tax Office  
305 E. Jackson St., Suite 102  
P.O. Box 2643  
Harlingen, TX 78551-2643

Harlingen Tax Office  
P.O. Box 2643  
Harlingen, TX 78551-2643

Internal Revenue Service  
Insolvency Section 5  
300 E. 8th Street, MAIL STOP 5022 AUS  
Austin, TX 78701

Matt Crockett  
Gardere, Attorneys and Counselors  
3000 Thanksgiving Tower  
1601 Elm Street  
Dallas, TX 75201-4761

Rosa C. Rodriguez  
P.O. Box 3605  
Harlingen, TX 78551

RREF CB SBL II Acquisitions, LLC  
c/o Quantum Servicing  
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