

United States Bankruptcy Court  
District of Puerto Rico

In re:  
GRUPO HIMA SAN PABLO INC  
Debtor

Case No. 23-02510-ESL  
Chapter 11

## CERTIFICATE OF NOTICE

District/off: 0104-3  
Date Rcvd: Oct 02, 2024

User: admin  
Form ID: pdf002

Page 1 of 1  
Total Noticed: 1

The following symbols are used throughout this certificate:

Symbol	Definition
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+	Addresses marked '+' were corrected by inserting the ZIP, adding the last four digits to complete the zip +4, or replacing an incorrect ZIP. USPS regulations require that automation-compatible mail display the correct ZIP.
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Notice by first class mail was sent to the following persons/entities by the Bankruptcy Noticing Center on Oct 04, 2024:

Recip ID	Recipient Name and Address
db	+ GRUPO HIMA SAN PABLO INC, PO BOX 4980, CAGUAS, PR 00726-4980

TOTAL: 1

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center.  
Electronic transmission includes sending notices via email (Email/text and Email/PDF), and electronic data interchange (EDI).

NONE

## BYPASSED RECIPIENTS

The following addresses were not sent this bankruptcy notice due to an undeliverable address, \*duplicate of an address listed above, \*P duplicate of a preferred address, or ## out of date forwarding orders with USPS.

NONE

## NOTICE CERTIFICATION

I, Gustava Winters, declare under the penalty of perjury that I have sent the attached document to the above listed entities in the manner shown, and prepared the Certificate of Notice and that it is true and correct to the best of my information and belief.

Meeting of Creditor Notices only (Official Form 309): Pursuant to Fed .R. Bank. P.2002(a)(1), a notice containing the complete Social Security Number (SSN) of the debtor(s) was furnished to all parties listed. This official court copy contains the redacted SSN as required by the bankruptcy rules and the Judiciary's privacy policies.

Date: Oct 04, 2024

Signature: /s/Gustava Winters

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF PUERTO RICO

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IN RE: GRUPO HIMA SAN PABLO, INC. Debtor	CASE NO. 23-02510 (ESL) CHAPTER 11
IN RE: CENTRO MEDICO EL TURABO, INC. Debtor	CASE NO. 23-02513 (ESL) CHAPTER 11
IN RE: HIMA SAN PABLO PROPERTIES, INC. Debtor	CASE NO. 23-02515 (ESL) CHAPTER 11
IN RE: PORTAL DE CAGUAS, INC. Debtor	CASE NO. 23-02516 (ESL) CHAPTER 11
IN RE: GENERAL CONTRACTING SERVICES, INC. Debtor	CASE NO. 23-02517 (ESL) CHAPTER 11
IN RE: IA DEVELOPERS, CORP. Debtor	CASE NO. 23-02519 (ESL) CHAPTER 11
IN RE: CMT DEVELOPMENT, LLC. Debtor	CASE NO. 23-02520 (ESL) CHAPTER 11
IN RE: JOCAR ENTERPRISES, INC. Debtor	CASE NO. 23-02521 (ESL) CHAPTER 11

1 IN RE:  
2 JERUSALEM HOME AMBULANCE, INC.  
3 Debtor

CASE NO. 23-02522 (ESL)  
CHAPTER 11

4 IN RE:  
5 HOST SECURITY SERVICES, INC.  
6 Debtor

CASE NO. 23-02523 (ESL)  
CHAPTER 11

7  
8 ORDER RE WITHDRAWAL OF CONSIGNED FUNDS

9 On August 6, 2024, Island Healthcare, LLC (the “DIP Lender”), in its capacity as the DIP  
10 Lender, and Alter Domus (US), LLC (the “Agent”, jointly with the DIP Lender, the “Lender  
11 Parties”), filed a motion requesting “that this Honorable Court enter an Order pursuant to PR  
12 LBR 7067-1(d) directing the clerk to disburse forthwith to the Lender Parties the sum of  
13 \$211,865.22, along with the proportionate interest accrued thereon.” (Lead Case, Dkt. #1014).  
14 The request was granted on August 8, 2024 (Lead Case, Dkt. #1016), and the court ordered the  
15 Clerk to “disburse registry funds [in] the amount of \$211,865.22[,] plus interest accrued, if any,  
16 less any fees imposed by law[,] forthwith to Island Healthcare, LLC; and Alter Domus (US),  
17 LLC.”

18 The Clerk has informed the court that “because each creditor has an individual vendor's  
19 number (AO213P) on the system (JIFMS), [she] cannot combine two vendors for a single  
20 payment.” See Notice to the Bar and the Public, Notice 19-17; revised Form AO213P. The Clerk  
21 informed counsel for the Agent of this matter. However, as of this date, no amended request  
22 clarifying the amounts to be paid to each party has been filed.

23 In view of the foregoing, the order entered on August 8, 2024 (Lead Case, Dkt. #1016) is  
24 set aside, without prejudice to filing an amended request specifying the amount to be paid to each  
25 party and Form AO 213P.  
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IT IS SO ORDERED.

In San Juan, Puerto Rico, this 2<sup>nd</sup> day of October 2024.



Enrique S. Lamotte  
United States Bankruptcy Judge



**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF PUERTO RICO**

María de los Ángeles González  
Clerk of Court

Jose V. Toledo U.S. Courthouse  
300 Recinto Sur St., Suite134  
San Juan, PR 00901

Notice 19-17

MCS Building Suite 222A  
880 Tito Castro Ave.  
Ponce, PR 00716-4732

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## Notice to the Bar and the Public

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**In Re: Implementation of AO 213P**

Notice is hereby given that effective today, November 12, 2019, new form AO 213P; ***Request for Payee Information and TIN Certification***, attached hereto, will be required in order to disburse consigned and unclaimed funds.

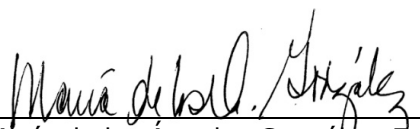
The Judiciary utilizes the AO 213P to collect information necessary to facilitate payment by EFT (electronic funds transfer) or U.S. Treasury check. Payments disbursed by the U.S. Treasury on the Judiciary's behalf must collect payee TIN (tax identification number) to comply with U.S. Treasury's TIN Policy. Also, for many payments, the Judiciary is required to file an information return (e.g. 1099-MISC; 1099-INT) with the IRS, and therefore must obtain payees' correct names and associated TINs to do so.

Therefore, when filing an application or motion to withdraw consigned and/or unclaimed funds, the AO 213P form must be filed as well. The form must include

the payee's physical signature and must disclose the full social security number of the payee. The applicant must file this form as a separate document from the application and/or motion using the CM\ECF event "AO213P Form (Payee Information and TIN Certification)", which will be restricted for privacy reasons. All sensitive information will be securely maintained and only visible to designated staff. The court may not process any payment without the form AO 231P.

The form can be found at <https://www.prb.uscourts.gov/?q=forms-0>

In San Juan, Puerto Rico, this 12<sup>th</sup> day of November 2019.

  
\_\_\_\_\_  
María de los Ángeles González, Esq.  
Clerk of Court

### REQUEST FOR PAYEE INFORMATION AND TIN CERTIFICATION

Refer to the instructions page for further information on completing this form. Vendors providing goods and services must use the AO 213 form.

Note: Typed forms and forms that include a populated Type of Payee may result in more efficient and precise processing. \*\*For handwritten forms, please see the General Instructions for the list of options for the Type of Payee, Refund recipient only. Is the refund over \$200?, and Part 4 - U.S. Tax Classification, and Part 6 - Account Type drop down menus.

\*\*Type of Payee [ ] Refund recipient only. Is the refund over \$200? [ ]

#### Part 1 Payee Information

Line 1. Payee Name: [ ]  
Line 2. Additional payee information: (if applicable) [ ]

#### Part 2 Business Name (if different from above)

[ ]

Part 3 Enter **only one** TIN in the appropriate box. The TIN provided must match the name given in Part 1, Line 1.

EIN: [ ] - [ ] - [ ] **or** SSN: [ ] - [ ] - [ ]

Part 4 \*\*Select the appropriate U.S. tax classification for person or entity listed in Part 1, Line 1.

[ ]

#### Part 5 Mailing Address (where payments, orders, and IRS 1099 forms, as applicable, will be sent)

Street Address: [ ]

City: [ ] State: [ ] Zip code: [ ]

Point of Contact (if different from above):

Name: [ ] Phone #: [ ]

Email: [ ]

#### Part 6 Electronic Funds Transfer (EFT) Information

Owner(s) name appearing on bank account: [ ]

Bank Name: [ ]

Select an Account Type: [ ] Routing # (9 digits): [ ]

Account number (do not include check number)

[ ]

#### Part 7 Additional Payees' Signatures

(if applicable for EFT payments)

By signing as a joint payee, you are authorizing the Judiciary to make a payment on your behalf to the bank account entered in Part 6.

Joint Payee(s) Signature(s): \_\_\_\_\_

#### Part 8 Certification of Account Holder

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number; and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest and dividends, or IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined in the instructions).

The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Payee Signature: \_\_\_\_\_ Date: [ ]

*Sensitive information must be securely maintained and only visible to designated staff.*

**Purpose of the AO 213P:** The Judiciary utilizes the AO 213P to collect information necessary to facilitate payment. For many payments, the Judiciary is required to file an information return (e.g., 1099-MISC; 1099-NEC; 1099-INT) with the IRS and, therefore, must obtain payees' correct names and associated TINs to do so. If a TIN is not provided, a payee may be subject to backup withholding – situations where the Judiciary must withhold a certain percentage to ensure the IRS receives any tax due on the payment.

Payments disbursed by the Treasury on the Judiciary's behalf must collect payee TINs to comply with the Treasury's TIN Policy. Payee TINs, obtained through this form, may be used by the government to collect and report on any delinquent amounts arising out of the payee's relationship with the government.

**\*\*Type of Payee:** Select the option from the Payee Type drop down menu that most accurately reflects current business operations or type of individual requesting payment from the Judiciary.

The following are the available choices for this drop down menu:

- Business Entity
- Other
- Refund Recipient
- Unclaimed Fund Claimant
- Unclaimed Funds Trustee

**\*\*Refund recipient only. Is the refund over \$200? drop down menu:**

- Yes
- No

**Part 1, Line 1**

Do not leave this line blank. Enter only one name for you or your entity. The name should match the name on your or your entity's U.S. tax return.

Name or Entity	Instructions
Individual	Enter the name shown on your U.S. tax return. If you have changed your last name without informing the Social Security Administration of the name change, enter your first name, the last name as shown on your social security card, and your new last name. For Individual Taxpayer Identification Number (ITIN) applicants, enter your name as it <u>was entered</u> on your IRS Form W-7 application, line 1a.
Sole proprietor or Single member LLC	Enter the name shown on IRS 1040/1040A/1040EZ. You may enter your business name or "doing business as" (DBA) name in Part 2, as applicable.
Partnership, LLCs, or Corporations (except Single-member LLCs)	Enter entity name as shown on the entity's U.S. tax return in Part 1. You may enter your business name or "doing business as" (DBA) name in Part 2, as applicable.
Other entities (e.g., trusts, non-profit entities, government agencies)	Enter entity name in Part 1 as shown on required U.S. tax documents which matches the entity shown on the charter or legal document creating the entity, as applicable.

**Part 1, Line 2**

If this form is being completed so that a payment may be issued payable to more than one person or entity, enter in Part 1, Line 1, the name of the person or entity whose TIN you entered in Part 3. Additional names (e.g., "and" or "or") or additional information for U.S. Treasury check payments (e.g., "care of") must be entered in Part 1, Line 2.

If payments is to be made by...	Then, enter the following...
EFT to Payee 1 AND Payee 2, co-owners of a joint account	Payee 1's name in Part 1, Line 1; Payee 2's name in Part 1, Line 2; Payee 1's TIN in Part 3.
A Treasury check made payable to Payee 1, Payee 2, AND Payee 3	Payee 1's name in Part 1, Line 1; Payee 2's name AND Payee 3's name in Part 1, Line 2; Payee 1's TIN in Part 3.
A Treasury check made payable to Payee 1, Payee 2 OR Payee 3	Payee 1's name in Part 1, Line 1; Payee 2's name OR Payee 3's name in Part 1, Line 2; Payee 1's TIN in Part 3.
A Treasury check made payable to Payee 1, CARE OF (c/o) Power of Attorney	Payee 1's name in Part 1, Line 1; C/O Power of Attorney name in Part 1, Line 2; Payee 1's TIN in Part 3.

**Part 2**

If you have a business or DBA name, you may enter it in Part 2.

**Part 3**

Enter your or your entity's TIN in the appropriate box. The TIN must be the TIN associated with person or entity listed in Part 1, Line 1. If you are not a resident alien and do not have - and are not eligible to get - an SSN, your TIN is your ITIN. Enter it in the social security number box. If you are a sole proprietor and have an EIN, you may enter either your SSN or EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**\*\*U.S Tax Classification:** Select the appropriate box in Part 4 for the U.S. tax classification of the person or the entity's whose name is entered in Part 1.

The following are the available choices for this drop down menu:

- Individual
- C Corporation
- S Corporation
- Single member LLC
- Government Entity (fed, state, local)
- LLC - C Corp
- LLC - S Corp
- LLC - Partnership
- Partnership
- Trust/Estate
- Non-Profit Organization
- Attorney or Law Firm (including LLCs and corporations)

**Part 5**

Enter your address (number, street, and apartment or suite number). This is where your paper Treasury check and any information returns (e.g., 1099-MISC; 1099-NEC; 1099-INT), if applicable, will be mailed. A point-of-contact (POC), email, and phone number may be entered, if desired. A POC must be entered should the POC differ from the entity or individual in Part 1, Line 1.

**Part 6**

The Routing Number must be nine digits. If you are unsure of your banking information, consult your financial institution.

**\*\*Account Type:** You must identify your account as either checking or savings to ensure our payment is accepted by your financial institution.

The following are the available choices for this drop down menu:

- Checking
- Savings

**Part 7**

For EFT payments, joint payees signing this form are authorizing one payment be made to the bank account entered in Part 6. Any associated tax reporting after receipt of the payment is the responsibility of the recipient of funds.

**Part 8**

**For a payment issued to more than one person or entity, only the person whose TIN is shown in Part 3 should sign. As a signer, you must cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.**

For item 3, you are considered a U.S. person, for federal tax purposes, if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in, or under the laws of, the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in 26 CFR 301.7701-7).

For a joint account EFT payment or a joint payment by a Treasury check, only the person whose TIN is shown in Part 3 should sign.