

U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU

FORM

IA-97152

2002 ECONOMIC CENSUS

PUERTO RICO - FINANCE, INSURANCE, REAL ESTATE, RENTAL AND LEASING

OMB No. 0607-0894: Approval Expires 06/30/2004

DUE DATE FEBRUARY 12, 2003

Mail your completed form to:

U.S. CENSUS BUREAU ATTENTION: Island Areas 1201 East 10th Street Jeffersonville, IN 47134-0001

Please read the accompanying information sheet(s) before answering the questions.

Need help or have questions about filling out this form?

Visit our Web site at www.census.gov/econhelp

Call 1-800-681-3012, between 8:00 a.m. and 8:00 p.m., Eastern time, Monday through Friday.

- OR -

Write to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.

IA-97152

INFORMATION COPY DO NOT USE TO REPORT

(Please correct any errors in this mailing address.)

maning address.	(Please correct any errors in the	ns maning	auure	55./					
Rico No. 11 of March 27, 1950, the questions and return the re CONFIDENTIAL. It may be so	RED BY LAW. Title 13, United States Code and require businesses and other organizations that eport to the U.S. Census Bureau. By the same lead only by persons sworn to uphold the confident purposes. Further, copies retained in respond	t receive t aws, YOU entiality o	this qu JR CE of Cen	iestion NSUS sus Bu	naire REP ireau	to a PORT	ansv F IS rma	wer ation	and ss.
• Use blue or black ink. • Ple	ase center numbers in their respective boxes.	Examples	;:						
Do not use pencil.Place an "X" inside the box.	not put slashes through 0 or 7.	\boxtimes	0 1	2 .	3 4	5	6	7 8	9
	n is an establishment. An establishment is ger r where services or industrial operations are pe							see	
MONTHS IN OPERATION				Mark "	X"		200)2	
				if Non	e N	umb	er of	f mon	ths
Number of months in operatio	n during 2002 (If none, mark "X" and go to �.)		. 0002						2
2 EMPLOYER IDENTIFICATION N Is the Employer Identification N establishment on its latest 2000	IUMBER Number (EIN) shown in the mailing address the 2 Internal Revenue Service Form 941-PR, Emplo No - Enter current EIN (9 digits)	yer's Qua	the on rterly	e used Federa	d for t	this Ret	urn	?	1
	sical location the same as shown in the mailing ddresses are not physical locations.) 0035 Number and street or location description		1	71D Q					
0032	0036 City, town, etc.	ODB PR, etc		ZIP Cod	le				<u> </u>
						-			
B. Municipio where this estab	lishment is physically located								
0049									

Form IA-97152 Page 2

								3 -
		Dollar figures should be rounded to			/lark "X" if None	\$ Mil.	2002 Thou.	Dol.
	HOW TO REPORT	thousands of dollars.				φ IVIII. 1	0 2 6	
	DOLLAR FIGURES	If a figure is \$1,025,628.79:	Report —	-		- '	0 2 0	
		If a value is "0" (or less than \$500.00):	Report —		X	1 1	1 1	
4	SALES, SHIPMENTS, RE	CEIPTS, OR REVENUE				000	20	
				ark "X" None	\$ Bil.	200 Mil.	Thou.	Dol.
					,	1 1	1 1	
	Revenue		0100	ш				
5	E-COMMERCE SALES, S	HIPMENTS, RECEIPTS, OR REVENUE						
	commissions, rents, Interchange (EDI) ne and sellers to transfe or may not be made	nt have any e-commerce sales, receipts, and or fees collected from any transaction contwork, electronic mail, or other online syster ownership of, or rights to use, goods or online. Please see the information sheet(npleted over an In em. Transactions services. Paymer	ternet are a nt for	t, Extran greeme these g	net, Electro ents betwe	onic Data en buyers	s
	0181	line B				200	12	
	₀₁₈₂ No - Go to	o			Es	timates are		e
					\$ Bil.	Mil.	Thou.	Dol.
	B. E-commerce sales, re e-commerce sales, re	eceipts, and/or revenue of this establishme eceipts, and/or revenue in 4 . Exclude sale	ent (Include s taxes.) .	0185		1 1	1 1	
6	EMPLOYMENT AND PA	YROLL						
	Service Form 941-F Number (EIN) show • Proprietors, partner Exclude: • Temporary staffing For further clarification, A. Number of paid emp B. Proprietors and partner	employees working at this establishment PR, Employer's Quarterly Federal Tax Return in the mailing address or corrected in ears, and unpaid family members working a obtained from a staffing service. See information sheet(s). Iloyees for pay period including March 12. Theres that worked 15 or more hours during	rn, and filed under t this establishmen	r the E	Mai if I	Internal I	Revenue cation 2002 Number	
	C. Unpaid family membincluded March 12	ers that worked 15 or more hours during	the week which		0346			
	D. Payroll before deduc	tions (Exclude employer's cost for fringe l	penefits.)		Nark "X" if None	\$ Mil.	Thou.	Dol.
	1. Annual payroll .			0300				
	2. First quarter payr	oll (January-March, 2002)		0310				
0	-12 Not Applicable.							
13	RENTAL PAYMENTS				Г		2222	
	(Exclude capital leases (leases with a contract to own at the end o	f the lease).)		Nark "X" if None	\$ Mil.	Z002 Thou.	Dol.
	A. Rental or lease of ma	achinery, equipment, and other items, exc	uding computer			7		
	B. Rental or lease of lar	nd, buildings, structures, store space, and	offices	0551				

Form	IA-97152					1	Page 3
If no Num	t shown, please ber (CFN) from t	ente the r	er your 11-digit Census File mailing address.				
14	Not Applicable.						
1 5	SELECTED EXPEN	1SES		Mark "X" if None	\$ Mil.	2002 Thou.	Dol.
	A. Communicatio related service	on ser e con	rvices (Include telephone, pager, data transmission, fax, and tracts.)				
	B. Computer serv	vices	(Include data processing and software.)				
	C. Office supplies	s				+++	
	D. Purchased mai	inten	ance and repair of machinery and equipment				
	E. Purchased mai integral parts (inten (elev	ance and repair of buildings, structures, offices, and their ators, etc.)				
16-	Not Applicab	ole.					
	KIND OF BUSINES Principal kind of b (Mark "X" only ON	busine					
	Depository cre	∍dit i	ntermediation				
0700	522 110 00 18		Commercial bank				
	522 120 00 16		Saving institution, remedial loan society or mutual benefit associ	ation - a	ccepting o	deposits	
	522 130 00 14		Credit union				
	522 190 00 45		Depository industrial bank, Morris Plan, or private bank				
	Finance compa	anies	s, consumer credit, and credit card issuance				
	522 210 00 17		Bank primarily issuing credit cards, or personal credit card issuar institution or nondepository credit institution	nce by pe	ersonal cr	edit	
	522 220 00 15		Sales finance including automotive, commercial and inventory finance insurance premium finance	nance (ex	ксерt trad	e finance)	,
	522 290 00 10		Consumer (personal) finance or small loan company, nondeposite Plan, pawn shop, federally-sponsored credit agency, mortgage by loan correspondent, international trade credit loan, finance compared intermediation - Specify	anker, m	ortgage c	ompany, c	or
0701							
0.0.			Language broken as agent				
	522 310 00 40	H	Loan or mortgage broker or agent	lu i a a	/ A TR 4\		
	522 320 00 14		Reserve and clearinghouse activities including automated teller n loan machine (ALM) network, electronic funds transfer network, e credit card processing service	nachine electronic	(ATM) or c paymen	t service,	d and
	522 390 00 19		Check cashing agency, money order or traveler's check issuance, or credit related services - Specify	loan/mo	ortgage lo	an servici	ng,
0701							

CONTINUE WITH ® ON PAGE 4

Form IA-97152 Page 4

. 0111	1 IA-37 132		r age 4
18	KIND OF BUSINES	SS - (Continued
	Investment bar	nkin	g, dealing, and brokerage
070			Investment banking and securities dealing
	523 120 00 48		Securities brokerage (full service and discount)
	523 130 00 12		Foreign currency exchange, commodity dealing, commodity futures commission merchant, or commodity trading company
	523 140 00 10		Commodity brokerage
	523 210 00 31		Securities or commodities exchange
	523 910 00 18		Trading/dealing (except securities and commodities), oil royalty trader (investing on own account), venture capital company, investment club, or other investor for own account
	523 920 00 16		Asset/portfolio manager
	523 930 00 63		Investment advice
	523 990 00 11		Other financial investment activities - Specify
070	1		
	Incurance carri	iore	and related activities
	524 110 00 14		Life, accident and health, and medical insurance carrier
	524 120 00 20		Insurance carrier, excluding life, accident and health, and medical
	524 130 00 10		Reinsurance carrier including life, accident and health, property and casualty, surety, fidelity and liability, title or other reinsurance carrier
	524 210 00 D7		Insurance agent or broker, not owned or operated by any insurance carrier, including risk finance consulting
	524 290 00 24		Insurance claims adjusting, appraiser, third party administrator of workers' compensation or other self-insurance, pension, health, or welfare fund, insurance advisory services, insurance rate-making organization, or other insurance services
	Trusts, funds,	and	plans
	525 100 00 21		Pension fund, profit sharing plan, union trust fund, 401-K retirement plan, health or welfare fund, workers' compensation self-insurance fund, or other insurance or employee benefit plan - Specify
070	1		
	525 930 00 19		Real estate investment trust - REIT (equity, hybrid, or mortgage)
	525 990 00 24		Other financial vehicles - Specify
070			
070			
	Lessors of real	esta	
	531 110 00 35		Lessor of residential buildings, including apartments and single-family houses
	531 120 00 33		Lessor of nonresidential buildings, including office/professional buildings, industrial buildings, shopping centers and retail stores
	531 130 00 13		Lessor of self-service storage or miniwarehouses
			CONTINUE WITH ® ON PAGE 5

Form IA-97152 Page 5

If not Numb	shown, please er (CFN) from t	ente the r	er your 11-digit Census File mailing address.
1 8 K	IND OF BUSINES	SS -	Continued
	Lessors of real	est	ate - Continued
0700	531 190 00 20		Lessor of other real property, including manufactured or mobile home sites and vacant lots
	531 210 00 18		Real estate agent or broker, including time share sales
	531 310 00 17		Property manager, including residential and nonresidential, resort/vacation, and time share
	531 320 00 49		Real estate appraiser
	531 390 00 85		Real estate listing or auction service, escrow or fiduciary agent, real estate consultant, or other real estate related service - Specify
0701			
	Rental or leasi	ng o	f personal articles or for the home
	532 110 00 17		Renting or leasing passenger cars, passenger vans, and sport utility vehicles, without drivers on a short-term basis
	532 120 00 15		Renting or leasing trucks, including nonpassenger vans, truck tractors, truck trailers, semi-trailers, and storage semi-trailers without drivers , on a short-term basis
	532 210 00 16		Consumer electronics and appliances
	532 220 00 14		Formal wear and costume rental
	532 230 00 53		Video tape rental store - renting prerecorded video tapes, cassettes or discs
	532 310 00 49		General rental center - wide range of items and equipment
	532 290 00 19		Home health furniture and equipment, residential furniture, party supplies, recreational goods and equipment, or other consumer goods
	Commercial ar	nd in	dustrial machinery and equipment rental and leasing
	532 410 00 14		Heavy construction and earthmoving equipment, aircraft, or tugboats without operators
	532 420 00 12		Office furniture and machines including computers and computer peripheral equipment
	532 490 00 17		Medical machinery and equipment, traffic equipment, including barricades, cones and signage, motion picture equipment, theatrical equipment or other nonconsumer type machinery or equipment - Specify
0701			
	Intangible asse	ets (e	except copyrighted works) leasing or licensing
	533 110 00 15		Franchise, trademarks, and patents leasing/licensing
	Other kinds of	bus	iness or activity
	775 000 00 15		Other kind of business or activity - Specify
0701			
19-2	6 Not Applicab	le.	

Form IA-97152 Page 6

101111111111111111111111111111111111111	age o
LEGAL FORM OF ORGANIZATION	
A. Legal form of organization that best describes this establishment at the end of 2002 (Mark "X" only ONE box.)	
o ₆₉₁ Individual proprietorship	
0692 Partnership	
Cooperative organization	
Corporation (Do not mark if any form of cooperative association.) - Go to line B	
Government - Specify	
0805	
Other - Specify	
0806	
B. If a corporation:	
1. Type of corporation (Mark "X" only ONE box.)	
Private corporation (nonprofit)	
Private corporation (for-profit)	
Public corporation	
2. Status that best describes this corporation (Mark "X" only ONE box.)	
Puerto Rico corporation	
United States corporation	
Foreign corporation - Specify country	
8917	
Not Applicable.	
OPERATIONAL STATUS	
Activity that best describes this establishment's status at the end of 2002 (Mark "X" only ONE box.)	
Onth Day Year In operation Onth Day Year	
Temporarily or 0015 Sold or leased to another operator - Give date at right AND enter new name and mailing address below	
0060 Name of new owner or operator 0061 Employer Identification Number	
Enter EIN of new owner (9 digits)	
0062 Mailing address (number and street, P.O. Box, etc.)	
0063 City, town, etc. 0064 State, PR, etc. 0065 ZIP Code	

α
/
\overline{C}
\bar{c}
5
$\overline{}$
^
σ
_

not shown, please enter your 11-digit Census File					
lumber (CFN) from the mailing address. The marks (Please use this space for any explanations that may be specified in the space for any explanations that may be specified in the space for any explanations.	ne essential in	understanding v	our reported	data)	
entarks (Flease use this space for any explanations that may b	re essential ill	understanding ye	ar reported	uata.,	
CERTIFICATION - This report is substantially accurate and v	was prepared	in accordance wi	th the instru	ctions.	
the time period covered by this report a colondar year?					.,
the time period covered by this report a calendar year?	FROM	onth Year	то	Month	Year
78 ☐ Yes 0079 ☐ No - Enter time period covered →	0070		0071		
72 Name of person to contact regarding this report	0073 Title				
Area code Number Exter	ension	Fax Area	code	Num	ber
0074		0075		-	
⁷⁶ Internet e-mail address		Date	Month	Day	Year
		completed	0069		
Thank you for completing your	2002 Ecc	onomic Cens	sus form	1_	