

**United States Bankruptcy Court  
District of Arizona**

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>MARITZA IRIZARRY, M.D. P.C.</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): <b>DBA SUNSHINE PEDIATRICS; FDBA MARITZA IRIZARRY MD INC.; FDBA SUNSHINE PEDIATRICS PC</b>	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) No./Complete EIN (if more than one, state all) <b>86-0909732</b>	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): <b>5251 W CAMPBELL AVENUE, SUITE 105 PHOENIX, AZ</b>	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code <b>85031</b>	ZIP Code
County of Residence or of the Principal Place of Business: <b>MARICOPA</b>	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code

Location of Principal Assets of Business Debtor  
(if different from street address above):

<p align="center"><b>Type of Debtor</b> (Form of Organization) (Check one box)</p> <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.)	<p align="center"><b>Nature of Business</b> (Check one box)</p> <input 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 checked="" type="checkbox"/> Other	<p align="center"><b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)</p> <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
<p align="center"><b>Chapter 15 Debtors</b></p> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:	<p align="center"><b>Tax-Exempt Entity</b> (Check box, if applicable)</p> <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<p align="center"><b>Nature of Debts</b> (Check one box)</p> <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.

<p align="center"><b>Filing Fee</b> (Check one box)</p> <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.	<p align="center"><b>Chapter 11 Debtors</b></p> Check one box: <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 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). Check if: <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). Check all applicable boxes: <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).
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**Statistical/Administrative Information**

 Debtor estimates that funds will be available for distribution to unsecured creditors.  
 Debtor estimates that, after any exempt property is excluded and administrative expenses paid,  
 there will be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000

Estimated Assets

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

Estimated Liabilities

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

THIS SPACE IS FOR COURT USE ONLY

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>MARITZA IRIZARRY, M.D. P.C.</b>
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**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location Where Filed: <b>- None -</b>	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor: <b>- None -</b>	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 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 delivered to the debtor the notice required by 11 U.S.C. §342(b).</p> <p><b>X</b> _____ Signature of Attorney for Debtor(s) (Date)</p>
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**Exhibit C**

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?

Yes, and Exhibit C is attached and made a part of this petition.

No.

**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

**Information Regarding the Debtor - Venue**

(Check any applicable box)

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.

There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

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.

**Certification by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes)

Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)

\_\_\_\_\_  
(Address of landlord)

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

Debtor has included in 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.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

**Voluntary Petition**  
*(This page must be completed and filed in every case)*

Name of Debtor(s):  
**MARITZA IRIZARRY, M.D. P.C.**

**Signatures**

**Signature(s) of Debtor(s) (Individual/Joint)**

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).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** \_\_\_\_\_  
Signature of Debtor

**X** \_\_\_\_\_  
Signature of Joint Debtor

\_\_\_\_\_  
Telephone Number (If not represented by attorney)

\_\_\_\_\_  
Date

**Signature of a Foreign Representative**

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.

(Check only one box.)

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.

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.

**X** \_\_\_\_\_  
Signature of Foreign Representative

\_\_\_\_\_  
Printed Name of Foreign Representative

\_\_\_\_\_  
Date

**Signature of Attorney\***

**X** /s/ DENNIS J. WORTMAN  
Signature of Attorney for Debtor(s)

DENNIS J. WORTMAN 002136  
Printed Name of Attorney for Debtor(s)

DENNIS J. WORTMAN, P.C.  
Firm Name

202 EAST EARLL DRIVE STE. 490  
PHOENIX, AZ 85012

\_\_\_\_\_  
Address

**Email: djwortman@azbar.org**

602-257-0101 Fax: 602-279-5650  
Telephone Number

March 20, 2013  
Date

\*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.

**Signature of Non-Attorney Bankruptcy Petition Preparer**

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.

\_\_\_\_\_  
Printed Name and title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
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.)

\_\_\_\_\_  
Address

**X** \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

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:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*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.*

**Signature of Debtor (Corporation/Partnership)**

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.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ MARITZA IRIZARRY  
Signature of Authorized Individual

MARITZA IRIZARRY  
Printed Name of Authorized Individual

PRESIDENT  
Title of Authorized Individual

March 20, 2013  
Date

**United States Bankruptcy Court  
District of Arizona**

In re MARITZA IRIZARRY, M.D. P.C.

Debtor(s)

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

Chapter 11

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, 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; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
ACCOUNTING SERVICES SUPPORT, LLC 1543 W ELLIOT ROAD, SUITE 101 GILBERT, AZ 85233	ACCOUNTING SERVICES SUPPORT, LLC 1543 W ELLIOT ROAD, SUITE 101 GILBERT, AZ 85233	BUSINESS DEBT		1,775.00
ACE MEDICAL BILLINGS % LUANN CLICK 4320 W LARKSPUR DR GLENDALE, AZ 85304	ACE MEDICAL BILLINGS % LUANN CLICK 4320 W LARKSPUR DR GLENDALE, AZ 85304	BUSINESS DEBT		12,839.41
BARTON & ASSOCIATES, INC 10 DEARBORN RD PEABODY, MA 01960	BARTON & ASSOCIATES, INC 10 DEARBORN RD PEABODY, MA 01960	BUSINESS DEBT		10,968.75
CENTURYLINK PO BOX 29040 PHOENIX, AZ 85038	CENTURYLINK PO BOX 29040 PHOENIX, AZ 85038	BUSINESS DEBT		957.56
CENTURYLINK PO BOX 29040 PHOENIX, AZ 85038	CENTURYLINK PO BOX 29040 PHOENIX, AZ 85038	BUSINESS DEBT		472.82
COMPHEALTH ASSOCIATES INC PO BOX 972625 DALLAS, TX 75397	COMPHEALTH ASSOCIATES INC PO BOX 972625 DALLAS, TX 75397	BUSINESS DEBT		11,000.00
COX COMMUNICATIONS PO BOX 78071 PHOENIX, AZ 85062	COX COMMUNICATIONS PO BOX 78071 PHOENIX, AZ 85062	BUSINESS DEBT		456.00
DEPENDABLE MEDICAL DIRECTORY PO BOX 36308 PHOENIX, AZ 85067	DEPENDABLE MEDICAL DIRECTORY PO BOX 36308 PHOENIX, AZ 85067	BUSINESS DEBT		3,657.30
ECONOSERVE SOLUTIONS 21410 N 19TH AVENUE, SUITE 151 PHOENIX, AZ 85027	ECONOSERVE SOLUTIONS 21410 N 19TH AVENUE, SUITE 151 PHOENIX, AZ 85027	BUSINESS DEBT		4,344.75

Debtor(s)

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
EPSTEIN & REYNOLDS PLC 8990 E RAINTREE DRIVE, SUITE 102 SCOTTSDALE, AZ 85260	EPSTEIN & REYNOLDS PLC 8990 E RAINTREE DRIVE, SUITE 102 SCOTTSDALE, AZ 85260	BUSINESS DEBT		1,298.00
EVA PAZ 1702 N 105TH DRIVE AVONDALE, AZ 85392	EVA PAZ 1702 N 105TH DRIVE AVONDALE, AZ 85392	BUSINESS DEBT		1,494.00
GAMMAGE & BURNHAM, PLC TWO N CENTRAL AVE, 15TH FLR PHOENIX, AZ 85004	GAMMAGE & BURNHAM, PLC TWO N CENTRAL AVE, 15TH FLR PHOENIX, AZ 85004	BUSINESS DEBT		668.00
HENRY SCHEIN 135 DURYEA RD MELVILLE, NY 11747	HENRY SCHEIN 135 DURYEA RD MELVILLE, NY 11747	BUSINESS DEBT		1,421.00
LANE & ERLICH LTD FAIRMONT PLACE 4001 N 35RD ST, SUITE 400 PHOENIX, AZ 85012	LANE & ERLICH LTD FAIRMONT PLACE 4001 N 35RD ST, SUITE 400 PHOENIX, AZ 85012	BUSINESS DEBT		4,695.00
METRO MEDICAL PLAZA % GPE MANAGEMENT LLC 2777 E CAMELBACK RD, SUITE 230 PHOENIX, AZ 85016	METRO MEDICAL PLAZA % GPE MANAGEMENT LLC 2777 E CAMELBACK RD, SUITE 230 PHOENIX, AZ 85016	BUSINESS DEBT		13,485.00
NCMIC INSURANCE CO PO BOX 9118 DES MOINES, IA 50306	NCMIC INSURANCE CO PO BOX 9118 DES MOINES, IA 50306	BUSINESS DEBT		1,999.00
PALO VERDE MEDICAL PLAZA % THOMAS PERRY 5251 W CAMPBELL AVE, SUITE 206 PHOENIX, AZ 85031	PALO VERDE MEDICAL PLAZA % THOMAS PERRY 5251 W CAMPBELL AVE, SUITE 206 PHOENIX, AZ 85031	BUSINESS DEBT		18,835.00
RYAN RAPP & UNDERWOOD 3200 N CENTRAL AVE., SUITE 1600 PHOENIX, AZ 85012	RYAN RAPP & UNDERWOOD 3200 N CENTRAL AVE., SUITE 1600 PHOENIX, AZ 85012	BUSINESS DEBT		420.00
SHARP BUSINESS SYSTEMS 610 W ALEMEDA TEMPE, AZ 85282	SHARP BUSINESS SYSTEMS 610 W ALEMEDA TEMPE, AZ 85282	BUSINESS DEBT		845.00
STERICYCLE INC 4010 COMMERCIAL AVENUE NORTHBROOK, IL 60062	STERICYCLE INC 4010 COMMERCIAL AVENUE NORTHBROOK, IL 60062	BUSINESS DEBT		3,831.00

In re MARITZA IRIZARRY, M.D. P.C.  
Debtor(s)

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

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**  
(Continuation Sheet)

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

I, the PRESIDENT of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date March 20, 2013

Signature /s/ MARITZA IRIZARRY  
**MARITZA IRIZARRY**  
**PRESIDENT**

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

ACCOUNTING SERVICES SUPPORT, LLC  
1543 W ELLIOT ROAD, SUITE 101  
GILBERT AZ 85233

ACE MEDICAL BILLINGS  
% LUANN CLICK  
4320 W LARKSPUR DR  
GLENDALE AZ 85304

AMERICAN MESSAGING  
1720 LAKEPOINT DR, SUITE 100  
LEWISVILLE TX 75057

ARROWHEAD HOSPITAL  
PO BOX 29302  
GLENDALE AZ 85308

BARTON & ASSOCIATES, INC  
10 DEARBORN RD  
PEABODY MA 01960

CENTURYLINK  
PO BOX 29040  
PHOENIX AZ 85038

CLIA LABORATORY  
PO BOX 530882  
ATLANTA GA 30353

COHN & DUSSI, LLC  
ATTN: LARRY STRAUSS  
300 TRADE CENTER, SUITE 3700  
WOBURN MA 01801

COMPHEALTH ASSOCIATES INC  
PO BOX 972625  
DALLAS TX 75397

COX COMMUNICATIONS  
PO BOX 78071  
PHOENIX AZ 85062

DEPENDABLE MEDICAL DIRECTORY  
PO BOX 36308  
PHOENIX AZ 85067

ECONOSERVE SOLUTIONS  
21410 N 19TH AVENUE, SUITE 151  
PHOENIX AZ 85027

ENTERPRISE BANK AND TRUST CO  
150 N MERAMEC AVE  
SAINT LOUIS MO 63105

EPSTEIN & REYNOLDS PLC  
8990 E RAINTREE DRIVE, SUITE 102  
SCOTTSDALE AZ 85260

EVA PAZ  
1702 N 105TH DRIVE  
AVONDALE AZ 85392

FORD MOTOR CREDIT

GAMMAGE & BURNHAM, PLC  
TWO N CENTRAL AVE, 15TH FLR  
PHOENIX AZ 85004

HENRY SCHEIN  
135 DURYEY RD  
MELVILLE NY 11747

LABCORP  
PO BOX 12140  
BURLINGTON NC 27216-2240

LANE & ERLICH LTD  
FAIRMONT PLACE  
4001 N 35RD ST, SUITE 400  
PHOENIX AZ 85012

METRO FIRE EQUIPMENT  
63 S HAMILTON PLACE  
GILBERT AZ 85233

METRO MEDICAL PLAZA  
% GPE MANAGEMENT LLC  
2777 E CAMELBACK RD, SUITE 230  
PHOENIX AZ 85016



NATURAL PARTNERS, INC  
8445 E HARTFORD DR  
SCOTTSDALE AZ 85255

NCMIC INSURANCE CO  
PO BOX 9118  
DES MOINES IA 50306

PALO VERDE MEDICAL PLAZA  
% THOMAS PERRY  
5251 W CAMPBELL AVE, SUITE 206  
PHOENIX AZ 85031

RYAN RAPP & UNDERWOOD  
3200 N CENTRAL AVE., SUITE 1600  
PHOENIX AZ 85012

SANOFI PASTEUR INC  
12458 COLLECTIONS CENTER DR  
CHICAGO IL 60693

SHARP BUSINESS SYSTEMS  
610 W ALEMEDA  
TEMPE AZ 85282

SPARKLETTTS  
PO BOX 660579  
DALLAS TX 75266

STAPLES  
DEPT LA  
PO BOX 83689  
CHICAGO IL 60696

STERICYCLE INC  
4010 COMMERCIAL AVENUE  
NORTHBROOK IL 60062

TELCOM YELLOW PAGES  
8343 ROSWELL RD, #397  
ATLANTA GA 30350

TMOBILE  
PO BOX 51843  
LOS ANGELES CA 90051

VERIZON WIRELESS  
7000 CENTRAL AVE SW  
ALBUQUERQUE NM 87121

YELLOW PAGES DIRECTORY  
PO BOX 29684  
DALLAS TX 75229

YELLOW PAGES UNITED  
PO BOX 53282  
ATLANTA GA 30355

**United States Bankruptcy Court  
District of Arizona**

In re MARITZA IRIZARRY, M.D. P.C.

Debtor(s)

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

Chapter 11

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for MARITZA IRIZARRY, M.D. P.C. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

**March 20, 2013**

Date

**/s/ DENNIS J. WORTMAN**

**DENNIS J. WORTMAN 002136**

Signature of Attorney or Litigant

Counsel for MARITZA IRIZARRY, M.D. P.C.

**DENNIS J. WORTMAN, P.C.**

**202 EAST EARLL DRIVE STE. 490**

**PHOENIX, AZ 85012**

**602-257-0101 Fax:602-279-5650**

**djwortman@azbar.org**