

United States Bankruptcy Court
Central District of California

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): MARINA DENTAL CORPORATION	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): MARINA DENTAL CENTER, L A DENTAL GROUP	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): 01-0892562	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): 13155 MINDANAO WAY MARINA DEL REY, CA ZIP CODE 90292	Street Address of Joint Debtor (No. and Street, City, and State): ZIP CODE
County of Residence or of the Principal Place of Business: LOS ANGELES	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): ZIP CODE	Mailing Address of Joint Debtor (if different from street address): ZIP CODE

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

<p>Type of Debtor (Form of Organization) (Check one box.)</p> <p><input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i></p> <p><input checked="" type="checkbox"/> Corporation (includes LLC and LLP)</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)</p>	<p>Nature of Business (Check one box.)</p> <p><input checked="" type="checkbox"/> Health Care Business</p> <p><input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B)</p> <p><input type="checkbox"/> Railroad</p> <p><input type="checkbox"/> Stockbroker</p> <p><input type="checkbox"/> Commodity Broker</p> <p><input type="checkbox"/> Clearing Bank</p> <p><input type="checkbox"/> Other</p> <p>Tax-Exempt Entity (Check box, if applicable.)</p> <p><input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).</p>	<p>Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)</p> <p><input type="checkbox"/> Chapter 7</p> <p><input type="checkbox"/> Chapter 9</p> <p><input checked="" type="checkbox"/> Chapter 11</p> <p><input type="checkbox"/> Chapter 12</p> <p><input type="checkbox"/> Chapter 13</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding</p> <p>Nature of Debts (Check one box.)</p> <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."</p> <p><input checked="" type="checkbox"/> Debts are primarily business debts.</p>
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<p>Filing Fee (Check one box.)</p> <p><input checked="" type="checkbox"/> Full Filing Fee attached.</p> <p><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.</p> <p><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>	<p>Chapter 11 Debtors</p> <p>Check one box:</p> <p><input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p><input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p>Check if:</p> <p><input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.</p> <p>-----</p> <p>Check all applicable boxes:</p> <p><input type="checkbox"/> A plan is being filed with this petition.</p> <p><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).</p>
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<p>Statistical/Administrative Information</p> <p><input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.</p> <p><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.</p>	<p>THIS SPACE IS FOR COURT USE ONLY</p> <p>FILED</p> <p>SEP 17 2009</p> <p>More than \$1 million</p> <p>SEAN M. S. BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA Deputy Clerk</p>
<p>Estimated Number of Creditors</p> <p><input type="checkbox"/> 1-49 <input checked="" 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</p>	
<p>Estimated Assets</p> <p><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</p>	
<p>Estimated Liabilities</p> <p><input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" 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>	

Voluntary Petition

(This page must be completed and filed in every case.)

Name of Debtor(s):

MARINA DENTAL CORPORATION

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 _____
Signature of Attorney for Debtor(s)

GEORGE J. PAUKERT SBN 183124

Printed Name of Attorney for Debtor(s)
LAW OFFICES OF GEORGE J. PAUKERT

Firm Name
737 S. WINDSOR BLVD., SUITE 304

Address **LOS ANGELES, CA 90005**

310-826-0180
Telephone Number **9-12-09**

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

X _____
Signature of Authorized Individual
WILLIAM E. GINZBURG

Printed Name of Authorized Individual
PRESIDENT

Title of Authorized Individual
9-12-09

Date

Party Name, Address and Telephone Number (CA State Bar No. If Applicable) C. J. PARKER SBN 183124 737 S WINDSOR BL #304 LOS ANGELES, CA 90005 (310) 826 0180	FOR COURT USE ONLY
UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA	
In re: MARINA DENTAL CORP.	CHAPTER 11 CASE NUMBER
Debtor.	(No Hearing Required)

**VENUE DISCLOSURE FORM
FOR CORPORATIONS FILING CHAPTER 11
(Required by General Order 97-02)**

Attach additional sheets as necessary and indicate so in each section

1. Specify the address of the principal office of the Debtor currently on file with the California Secretary of State (from Form S0100, S0200, or S0300):

13155 MINDANAO WAY
 MARINA DEL REY,
 CA 90292

2. Specify the address of the principal office of the Debtor listed on the Debtor's most recent federal tax return:

13155 MINDANAO WAY
 MARINA DEL REY,
 CA 90292

3. Disclose the current business address(es) for all corporate officers:

13155 MINDANAO WAY
 MARINA DEL REY

4. Disclose the current business address(es) where the Debtor's books and records are located:

CA
 13155 MINDANAO WAY
 MARINA DEL REY,
 CA 90292

In re <i>MARINA DENTAL CORP</i>	CHAPTER 11 Debtor. CASE NUMBER
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5. List the address(es) where the majority of the Debtor's assets are located based on a book value determination as set forth on the Debtor's most recent balance sheet:

*13155 MINDANAO WAY
MARINA DEL REY,
CA 90292*

6. Disclose any different address(es) to those listed above within six months prior to the filing of this petition and state the reasons for the change in address(es):

7. State the name and address of the officer signing this Statement and the relationship of such person to the Debtor (specify):

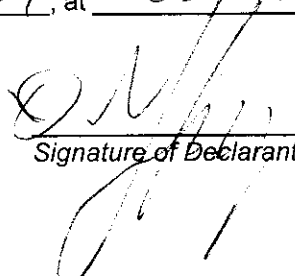
*WILLIAM E. GINZBURG, PRES
13155 MINDANAO WAY
MARINA DEL REY, CA
90292*

8. Total number of attached pages of supporting documentation: _____

9. I declare under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct.

Executed on the 12 day of SEPTEMBER, 2009, at LOS ANGELES, California.

WILLIAM E GINZBURG
Type Name of Officer
PRESIDENT
Position or Title of Officer


Signature of Declarant


UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA

In re <i>MARINA DENTAL CORP.</i>	Debtor(s).	CHAPTER: <i>11</i>	CASE NO.:
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Form 4.
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 and Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed or subject to setoff	Amount of claim [if secured also state value of security]
① LUCEDENT LABORATORY SERVICES INC. 718 W DUARTE AVE	JEANNIE TSAI <i>mar</i> 888-242-0069 #6-228 ARCADIA, CA 91006	TRADE	/	\$ 83,137.56
② STAR DENTAL 13310 ESTRELLA AVE GARDENA, CA 90248	JAMES STEWINS DANIELS 1283 COLLEGE PK DR DOKER, DE 19904 (800)-305-0773	TRADE	/	\$ 11,225.94
③ DARDEN DENTAL 6065 S WESTERN AVE. LOS ANGELES CA 90034	(800) 290-4405 ACCT PAYABLE	TRADE	/	\$ 10,491.24
④ DEN SYNTHETIC DENTAL DESIGN 2525 W 8TH ST, STE 350 LOS ANGELES, CA 90057	(213) 365-2104 ACCT PAYABLE	TRADE	/	\$ 7,171.47

Date: 9-15-09

 Debtor

[Declaration as in Form 2]

**UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA**

In re <p align="center" style="font-size: 1.2em; margin: 0;"><i>MARINA DENTAL CORP</i></p> Debtor(s)	CHAPTER: <i>11</i> CASE NO.:
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LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS
(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed or subject to setoff	Amount of claim [if secured also state value of security]
⑤ <i>BERGMAN DENTAL</i> <i>8688 W WASHINGTON & CULVER CITY, CA 90232</i>	<i>NASSER (310) 551-6060 (310) 208-4373</i>	<i>TRADE</i>	<i>-</i>	<i>\$ 5,962.89</i>
⑥ <i>DENTECH INT'L</i> <i>3590 HARBOR GATEWAY N COSTA MESA, CA 92626</i>	<i>Acct PAYABLE (714) 241-1515</i>	<i>TRADE</i>	<i>-</i>	<i>\$ 3,971.97</i>
⑦ <i>MARINA DENTAL LAB</i> <i>11645 WILSHIRE BL #803 LOS ANGELES, CA 90035</i>	<i>Acct PAYABLE</i>	<i>TRADE</i>	<i>"</i>	<i>\$ 3,000.00</i>
⑧ <i>HENRY SCHEIN</i> <i>135 DURYEA RD MELVILLE, NY 11747</i>	<i>Acct PAYABLE (800) 472-4316</i>	<i>TRADE</i>	<i>-</i>	<i>\$ 4,614.61</i>
⑨ <i>INVISALIGN</i> <i>881 MARTIN AVE SANTA CLARA, CA 95050</i>	<i>Acct PAYABLE</i>	<i>TRADE</i>	<i>-</i>	<i>\$ 7,482.55</i>
⑩ <i>CITIBANK BLDG 1 FL 1</i> <i>100 CITIBANK DR SAN ANTONIO, TX 78215</i>	<i>Acct PAYABLE (214) 777-528-0990</i>	<i>LOAN</i>	<i>-</i>	<i>\$ 40,000.00</i>

UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA

In re MARINA DENTAL CORP	CHAPTER: 11 CASE NO.:
Debtor(s).	

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

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed or subject to setoff	Amount of claim [if secured also state value of security]
(1) DE LAGTE CANDEN FINSERU 111 OLD EAGLE SCH RD WAYNE, PA 19087	C/O ELI GORDON 610-397-6509	EQUIP USE	-	\$ 157,173.07
(2) IRS OGDEN, UT 84201	REV. OFCR 802-829-0115	TAX	-	\$ 20,082.82
(3) CITY OF (COUNTY LOS ANGELES TAX COLL) 225 N. HILL ST. RM 122 LOS ANGELES, CA 90012	TAX AGENT 213-843-7935	TAX	-	\$ 14,000.00
(4) BROOKFIELD PROPERTIES 4640 ADMIRALTY WAY, STE 222 MARINA DEL REY, CA 90292	CHIP WILLIAMS (310) 821-0777	RENT	-	\$ 21,206.72

Marina Dental Corporation
William E Ginzburg Pres
13155 Mindanao Way
Marina Del Rey, CA 90292

George J Paukert Esq
737 S Windsor Blvd Ste 304
Los Angeles, CA 90005

U S Trustee
725 S Figueroa St Ste 2600
Los Angeles, CA 90017

Lucedent Laboratory Services Inc
713 W Duarte Ave Ste G228
Arcadia, CA 91006

Darden Dental
POB 47810
Los Angeles, CA 90047

Align Technologies
881 Martin Ave
Santa Clara, CA 95050

Dentech International
3590 Harbor Gateway North
Costa Mesa, CA 92626

Densthetic Dental Design
2525 W 8th St Ste 350
Los Angeles, CA 90057

Bergman Dental
Nasser Dayzadeh
8668 W Washington Blvd
Culver City, CA 90232

Star Dental Supply
13210 Estrella Ave
Gardena, CA 90248

James Stevens Daniels
1283 College Park Drive
Dover, DE 19904

Henry Schien
135 Duryea Rd
Melville, NY 11747

Marina Dental Lab
11645 Wilshire Blvd Ste 803
Los Angeles, CA 90025

Citibank
100 Citibank Dr Bldg 1 Fl 1
San Antonio, TX 78245

De Lage Landen Fin Serv
111 Old Eagle School Rd
Wayne, PA 19087

IRS
Ogden, UT 84201

City of Los Angeles
County Tax Collector
225 N Hill St Rm 122
Los Angeles, CA 90012

Brookfield Properties
4640 Admiralty Way Ste 222
Marina Del Rey, CA 90292