

| UNITED STATES BANKRUPTCY COURT<br>MIDDLE DISTRICT OF FLORIDA<br>ORLANDO DIVISION   |  |  |  | Voluntary Petition  |                                  |
|--|--|--|--|---|----------------------------------|
| Name of Debtor (if individual, enter Last, First, Middle):<br><b>Kaplan Cosmetics Surgery Inc.</b>   |  |  | Name of Joint Debtor (Spouse) (Last, First, Middle):   |   |                                  |
| All Other Names used by the Debtor in the last 8 years<br>(include married, maiden, and trade names):  |  |  | All Other Names used by the Joint Debtor in the last 8 years<br>(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):<br><b>22-3870608</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):<br><b>1640 N. Maitland Ave<br/>Suite 1<br/>Maitland, FL</b>  |  |  | Street Address of Joint Debtor (No. and Street, City, and State):  |   |                                  |
| ZIP CODE<br><b>32751</b>   |  |  | ZIP CODE   |   |                                  |
| County of Residence or of the Principal Place of Business:<br><b>orange</b>  |  |  | County of Residence or of the Principal Place of Business:   |   |                                  |
| Mailing Address of Debtor (if different from street address):<br><b>1640 N. Maitland Ave<br/>Suite 1<br/>Maitland, FL</b>  |  |  | Mailing Address of Joint Debtor (if different from street address):  |   |                                  |
| ZIP CODE<br><b>32751</b>   |  |  | ZIP CODE   |   |                                  |
| Location of Principal Assets of Business Debtor (if different from street address above):  |  |  |  |   |                                  |
| ZIP CODE   |  |  |  |   |                                  |
| <b>Type of Debtor</b><br>(Form of Organization)<br>(Check one box.)<br><br><input type="checkbox"/> Individual (includes Joint Debtors)<br><i>See Exhibit D on page 2 of this form.</i><br><input checked="" type="checkbox"/> Corporation (includes LLC and LLP)<br><input type="checkbox"/> Partnership<br><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><br>(Check one box.)<br><input checked="" type="checkbox"/> Health Care Business<br><input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B)<br><input type="checkbox"/> Railroad<br><input type="checkbox"/> Stockbroker<br><input type="checkbox"/> Commodity Broker<br><input type="checkbox"/> Clearing Bank<br><input type="checkbox"/> Other<br><hr/> <b>Tax-Exempt Entity</b><br>(Check box, if applicable.)<br><input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).   |  | <b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.)<br><br><input type="checkbox"/> Chapter 7<br><input type="checkbox"/> Chapter 9<br><input checked="" type="checkbox"/> Chapter 11<br><input type="checkbox"/> Chapter 12<br><input type="checkbox"/> Chapter 13<br><br><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding<br><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding<br><hr/> <b>Nature of Debts</b><br>(Check one box.)<br><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."<br><input checked="" type="checkbox"/> Debts are primarily business debts. |                                  |
| <b>Filing Fee</b> (Check one box.)<br><input checked="" type="checkbox"/> Full Filing Fee attached.<br><br><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.<br><br><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><br><input checked="" type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D).<br><input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).<br><b>Check if:</b><br><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).<br><hr/> <b>Check all applicable boxes:</b><br><input checked="" type="checkbox"/> A plan is being filed with this petition.<br><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><br><input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.<br><input checked="" 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 |
| <b>Estimated Number of Creditors</b><br><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   |  |  |  |   |                                  |
| <b>Estimated Assets</b><br><input checked="" 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 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                   |  |  |  |   |                                  |
| <b>Estimated Liabilities</b><br><input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" 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              |  |  |  |   |                                  |

|  |               |  |  |
|--|---------------|--|--|
| <b>Voluntary Petition</b><br><i>(This page must be completed and filed in every case.)</i>   |               | Name of Debtor(s): <b>Kaplan Cosmetics Surgery Inc.</b>  |  |
| <b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)   |               |  |  |
| Location Where Filed:<br><b>None</b>   | Case Number:  | Date Filed:  |  |
| Location Where Filed:  | Case Number:  | Date Filed:  |  |
| <b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)   |               |  |  |
| Name of Debtor:<br><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 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="font-size: 2em; margin-top: 20px;"><b>X</b> _____</p> <p style="text-align: right; margin-top: 10px;">Date</p> |  |
| <p style="text-align: center;"><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 style="text-align: center;"><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 style="text-align: center;"><b>Information Regarding the Debtor - Venue</b><br/>(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 style="text-align: center;"><b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b><br/>(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> <div style="margin-left: 400px; margin-top: 10px;">       _____<br/>       (Name of landlord that obtained judgment)     </div> <div style="margin-left: 400px; margin-top: 30px;">       _____<br/>       (Address of landlord)     </div> <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 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.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).</p> |               |  |  |

**Voluntary Petition***(This page must be completed and filed in every case)*Name of Debtor(s): **Kaplan Cosmetics Surgery Inc.****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** \_\_\_\_\_**X** \_\_\_\_\_\_\_\_\_\_  
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/ Dennise Hernandez Gruber  
**Dennise Hernandez Gruber** Bar No. **0494771**

**The Law Office of Dennise Hernandez Gruber**  
**419 N. Magnolia Ave**  
**Orlando, Florida 32801**

Phone No. **(407) 872-6061** Fax No. \_\_\_\_\_12/29/2010

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 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.

**Kaplan Cosmetics Surgery Inc.**

**X** /s/ Barry J. Kaplan  
Signature of Authorized Individual

**Barry J. Kaplan**

Printed Name of Authorized Individual

**President**

Title of Authorized Individual

**12/29/2010**

Date

**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.*

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

IN RE: **Kaplan Cosmetics Surgery Inc.**

CASE NO

CHAPTER **11**

**EXHIBIT "A" TO VOLUNTARY PETITION**

|  |                |                                      |
|--|----------------|--------------------------------------|
| 1. Debtor's employer identification number is <u>22-3870608</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 _____.                         |                |                                      |
| a. Total Assets  |                |                                      |
| b. Total Liabilities   |                |                                      |
| <b>Secured debt</b>  | <b>Amounts</b> | <b>Approximate number of holders</b> |
| Fixed, liquidated secured debt   |                |                                      |
| Contingent secured debt  |                |                                      |
| Disputed secured debt  |                |                                      |
| Unliquidated secured debt  |                |                                      |
| <b>Unsecured debt</b>  | <b>Amounts</b> | <b>Approximate number of holders</b> |
| Fixed, liquidated unsecured debt   |                |                                      |
| Contingent unsecured debt  |                |                                      |
| Disputed unsecured debt  |                |                                      |
| Unliquidated unsecured debt  |                |                                      |
| <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>Comments, if any</b>  |                |                                      |
| 4. Brief description of debtor's business:   |                |                                      |

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

IN RE: **Kaplan Cosmetics Surgery 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:

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, **Barry J. Kaplan**, the **President** 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: **12/29/2010**

Signature: **/s/ Barry J. Kaplan**  
**Barry J. Kaplan**  
**President**

In re **Kaplan Cosmetics Surgery 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 |
|--------------------------------------|---|--|--|-------------------------|
| None                                 |   |  |  |                         |

**Total:** **\$0.00**  
(Report also on Summary of Schedules)

In re **Kaplan Cosmetics Surgery 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. | <b>X</b> |                                      |  |
| 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> |                                      |  |

In re **Kaplan Cosmetics Surgery 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.  | <b>X</b> |                                      |  |
| 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> |                                      |  |



In re **Kaplan Cosmetics Surgery 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.  | <b>X</b> |                                      |  |
| 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> |                                      |  |
| 26. Boats, motors, and accessories.   | <b>X</b> |                                      |  |

In re **Kaplan Cosmetics Surgery 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 |
|--|----------|--|--|
| 27. Aircraft and accessories.                    | <b>X</b> |  |  |
| 28. Office equipment, furnishings, and supplies. |          | Sharp Aquos 46' Flatscreen TV                          | \$275.00   |
|  |          | Wood/laminate entertainment center                     | \$145.00   |
|  |          | Wood and Glass Coffee Table                            | \$40.00  |
|  |          | Leather couch in waiting room                          | \$195.00   |
|  |          | 3 Leather chairs in waiting room                       | \$60.00  |
|  |          | 2 fabric chairs in the waiting room                    | \$20.00  |
|  |          | Glass Display case in the waiting room                 | \$110.00   |
|  |          | Area rug and entry mat i the waiting room              | \$25.00  |
|  |          | Coffee Table in the Consultation Room                  | \$50.00  |
|  |          | leather couch in the consultation room                 | \$150.00   |
|  |          | leather arm chair                                      | \$85.00  |
|  |          | 2 glass end tables                                     | \$60.00  |
|  |          | floor mirror   | \$125.00   |
|  |          | wall mirror in consultation room                       | \$55.00  |
|  |          | table lamp in consultation room                        | \$25.00  |
|  |          | assorted decorations                                   | \$25.00  |
|  |          | Takara Belmont/Athlegen exam bed iin Dermatology Room. | \$550.00   |
|  |          | Minerva Galvanic/Minerva 900 facial                    | \$375.00   |

In re **Kaplan Cosmetics Surgery Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 4*

| Type of Property | None | Description and Location of Property                                      | Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption |
|------------------|------|---|--|
|                  |      | chair in dermatology room   | \$25.00  |
|                  |      | stool in dermatology room   | \$20.00  |
|                  |      | TP-208 small sterilizer machine   | \$150.00   |
|                  |      | Transderm Ultrapeel-Microabrasion machine S/N CT 258-Mattioli Engineering | \$800.00   |
|                  |      | Plastic bins for files  | \$10.00  |
|                  |      | lamps in Storage closet   | \$10.00  |
|                  |      | Exam table (dated) in Vein Room   | \$55.00  |
|                  |      | OMRON sys/dia handheld in Vein Room                                       | \$40.00  |
|                  |      | Chair in Vein Room  | \$10.00  |
|                  |      | stool in vein room  | \$10.00  |
|                  |      | exam table in Laser Room  | \$245.00   |
|                  |      | chair in laser room   | \$20.00  |
|                  |      | Stool in Laser Room   | \$20.00  |
|                  |      | KTP MACHINE NOT OPPERATIONAL  | \$255.00   |
|                  |      | Ellman Radiofrequency machine in laser room 7-8 years.                    | \$1,600.00   |
|                  |      | Oreck SL & Dirt Devil vacums in File/Storage Room (2)                     | \$40.00  |
|                  |      | 5 door lateral metal filing cabinet in File/Storage Room                  | \$40.00  |
|                  |      | tool boxes with assorted tooling in file storage room                     | \$15.00  |

In re **Kaplan Cosmetics Surgery Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 5*

| Type of Property | None | Description and Location of Property  | Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption |
|------------------|------|---|--|
|                  |      | Dell Poweredge SC120 server wit associated electronics in File/Storage Room                                 | \$295.00   |
|                  |      | Phone system with 4 lines and 4 RCA executive phones in Dr. Kaplan's & main office in the File/Storage room | \$225.00   |
|                  |      | Assorted supplies/electronics in closet   | \$25.00  |
|                  |      | Exam Table in Dr. Kaplan's Office   | \$50.00  |
|                  |      | Desk made mostly of glass in Dr. Kaplan's Office  | \$135.00   |
|                  |      | Leather office chair in Dr. Kaplan's Office   | \$45.00  |
|                  |      | Wooden File Cabinet in Dr. Kaplan's Office  | \$20.00  |
|                  |      | 2 wooden shelving units in Dr. Kaplan Office  | \$180.00   |
|                  |      | Assorted office decor in Dr. Kaplan Office  | \$25.00  |
|                  |      | DMI Vacudent Healthchair Group-Surgery Bed in Surgery Room  | \$695.00   |
|                  |      | Infusion Surgery Room   | \$85.00  |
|                  |      | Aspirating Machine in Surgery Room  | \$75.00  |
|                  |      | Surgery light in Surgery Room   | \$30.00  |
|                  |      | 2 Stools  | \$40.00  |
|                  |      | Magic Chef microwave  | \$10.00  |
|                  |      | 2 IV metal Stands   | \$20.00  |
|                  |      | Surgical metal tray stand   | \$25.00  |

In re **Kaplan Cosmetics Surgery Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 6*

| Type of Property | None | Description and Location of Property                                   | Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption |
|------------------|------|--|--|
|                  |      | OMRON scale in Surgery Room 1  | \$25.00  |
|                  |      | Wall mirror in Surgery Room#1  | \$20.00  |
|                  |      | Assorted medical supplies in Surgery Room 31                           | \$25.00  |
|                  |      | wall clock in Surgery Room #1  | \$10.00  |
|                  |      | CarboMed Carbossi machine 2006 in Surgery Room #2                      | \$1,350.00   |
|                  |      | CO2 laser system in Surgery Room #2                                    | \$200.00   |
|                  |      | Link elecyrlic exam bed in Surgery room #2                             | \$255.00   |
|                  |      | ACU Evac IE Smoke Evacuator in Surgery room #2                         | \$85.00  |
|                  |      | Goldstar Microwave Surgery Room #2                                     | \$15.00  |
|                  |      | Surgical tray in Surgical Room #2                                      | \$25.00  |
|                  |      | Chair in Surgical Room #2  | \$20.00  |
|                  |      | Rolling table & misc operating furniture in Surgical Room #2           | \$40.00  |
|                  |      | Holmes Fan Surgery Room #2   | \$10.00  |
|                  |      | assorted medical supplies in Surgical room #2                          | \$25.00  |
|                  |      | Whirlpool upright washer/dryer unit in Surgery Room #2                 | \$150.00   |
|                  |      | Ritter M9 UltraClave-Sterilizer in Surgery Room #2                     | \$535.00   |
|                  |      | Sanyo mini-fridge in Surgery Room #2                                   | \$45.00  |
|                  |      | Assorted medical supplies-sheets/supplies/plastics, in Surgery Room #2 | \$50.00  |
|                  |      | 5 Rolling leather office chairs in the Office and Kitchen              | \$125.00   |

In re **Kaplan Cosmetics Surgery Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 7*

| Type of Property | None | Description and Location of Property  | Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption |
|------------------|------|---|--|
|                  |      | Computer systems with flatscreen monitors & accessories in Office and Kitchen | \$135.00   |
|                  |      | Acer laptop computer in Office and Kitchen                                    | \$195.00   |
|                  |      | Motorola cordless phone in Office and Kitchen                                 | \$20.00  |
|                  |      | Brother A/I/O machine in Office and Kitchen                                   | \$35.00  |
|                  |      | Verifone credit card terminal in Office and Kitchen                           | \$45.00  |
|                  |      | Leather chairs-Purple decorative in Office and Kitchen                        | \$45.00  |
|                  |      | Fellowes shredder in Office and Kitchen                                       | \$25.00  |
|                  |      | Oster microwave in Office and Kitchen   | \$15.00  |
|                  |      | Mr. Coffee machine in Office and Kitchen                                      | \$5.00   |
|                  |      | Wheelchair in Office and Kitchen  | \$20.00  |
|                  |      | wall mirror in Office and Kitchen   | \$5.00   |
|                  |      | Standard exam tables in Melbourne Office Location                             | \$100.00   |
|                  |      | Surgery table in Melbourne Office Location                                    | \$500.00   |
|                  |      | Waiting room chairs/furniture in Melbourne Office Location                    | \$175.00   |
|                  |      | A/I/O fax machine in Melbourne Office Location                                | \$45.00  |
|                  |      | smoke evacuator in Melbourne Office Location                                  | \$85.00  |
|                  |      | Aspiration machine in Melbourne Office Location                               | \$75.00  |
|                  |      | Infusion machine in Melbourne Office Location                                 | \$85.00  |

In re **Kaplan Cosmetics Surgery Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 8*

| Type of Property   | None | Description and Location of Property     | Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption |
|--|------|--|--|
|  |      | Miscellaneous decor, in Melbourne Office | \$50.00  |
| 29. Machinery, fixtures, equipment, and supplies used in business.   | X    |  |  |
| 30. Inventory.   | X    |  |  |
| 31. Animals.   | X    |  |  |
| 32. Crops - growing or harvested. Give particulars.  | X    |  |  |
| 33. Farming equipment and implements.  | X    |  |  |
| 34. Farm supplies, chemicals, and feed.  | X    |  |  |
| 35. Other personal property of any kind not already listed. Itemize.   | X    |  |  |
| <div style="text-align: right;"> <b>8</b> continuation sheets attached<br/>           (Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)         </div> |      |  | <b>Total &gt;</b><br><b>\$12,385.00</b>  |

In re **Kaplan Cosmetics Surgery 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  
 \$146,450.\*

| Description of Property   | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|--------------------------------------|----------------------------|---|
| Not Applicable  |                                      |                            |   |
| * Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment. |                                      | \$0.00                     | \$0.00  |



**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.)     | 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 #:  |          | DATE INCURRED:<br>NATURE OF LIEN:<br><b>Purchase Money</b><br>COLLATERAL:<br><b>equipment</b><br>REMARKS:<br><b>Stipulated Final Judgement was entered on 04/07/2010</b>                   |            |              |          | <b>\$80,667.60</b>                                    | <b>\$80,667.60</b>        |
| <b>Bank of America</b><br><b>2059 Northlake parkway</b><br><b>3rd Floor</b><br><b>Tucker Ga 30084-5399</b> |          | VALUE: <b>\$0.00</b>   |            |              |          |   |                           |
| <b>Representing:</b><br><b>Bank of America</b>   |          | <b>Andrew T. Dixon</b><br><b>Winderweedle, Haines, Ward &amp; Woodman,</b><br><b>390 N. Orange Ave. suite 1500</b><br><b>P.O. Box 1391</b><br><b>Orlando, FL 32802-1391</b>                |            |              |          | <b>Notice Only</b>                                    | <b>Notice Only</b>        |
| ACCT #: <b>0047754146-10000</b>  |          | DATE INCURRED:<br>NATURE OF LIEN:<br><b>Arrearage</b><br>COLLATERAL:<br><b>assets</b><br>REMARKS:<br><b>In litigation case number 2010-ca-020029, Default entered on October 12, 2010.</b> |            |              |          | <b>\$49,978.68</b>                                    | <b>\$37,076.68</b>        |
| <b>M&amp;I MARSHALL &amp; ILSEY BANK</b><br><b>100 EAST PACKWOOD AVE</b><br><b>MAITLAND, FL 32751</b>      |          | VALUE: <b>\$12,902.00</b>  |            |              |          |   |                           |
| <b>Representing:</b><br><b>M&amp;I MARSHALL &amp; ILSEY BANK</b>   |          | <b>Marvin L. Beaman Jr.</b><br><b>Marvin L. Beaman, JR. PA</b><br><b>605 N. Wymore Road</b><br><b>Winter Park, FL 32789-2893</b>   |            |              |          | <b>Notice Only</b>                                    | <b>Notice Only</b>        |
| <b>Subtotal (Total of this Page) &gt;</b>  |          |  |            |              |          | <b>\$130,646.28</b>                                   | <b>\$117,744.28</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.)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

| CREDITOR'S NAME AND<br>MAILING ADDRESS<br>INCLUDING ZIP CODE AND<br>AN ACCOUNT NUMBER<br>(See Instructions Above.) | CODEBTR | DATE CLAIM WAS<br>INCURRED, NATURE<br>OF LIEN, AND<br>DESCRIPTION AND<br>VALUE OF<br>PROPERTY SUBJECT<br>TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|---------|--|------------|--------------|----------|--|---------------------------------|
| <b>Representing:<br/>M&amp;I MARSHALL &amp; ILSEY BANK</b>   |         | <b>Marvin L. Beaman Jr. Esq.<br/>605 N. Wymore Road<br/>Winter Park Fl 32789</b>                                 |            |              |          | <b>Notice Only</b>   | <b>Notice Only</b>              |
|  |         |  |            |              |          |  |                                 |
|  |         |  |            |              |          |  |                                 |
|  |         |  |            |              |          |  |                                 |
|  |         |  |            |              |          |  |                                 |
| <b>Subtotal (Total of this Page) &gt;</b>  |         |  |            |              |          | <b>\$0.00</b>  | <b>\$0.00</b>                   |
| <b>Total (Use only on last page) &gt;</b>  |         |  |            |              |          | <b>\$130,646.28</b>  | <b>\$117,744.28</b>             |

Sheet no. 1 of 1 continuation sheets attached  
to Schedule of Creditors Holding Secured Claims(Report also on  
Summary of  
Schedules.)(If applicable,  
report also on  
Statistical  
Summary of  
Certain Liabilities  
and Related  
Data.)

**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 \$11,725\* 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 \$5,775\* 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 \$2,600\* 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 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

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

|                  |                           |
|------------------|---------------------------|
| TYPE OF PRIORITY | Administrative allowances |
|------------------|---------------------------|

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)  | CODEBCTOR | DATE CLAIM WAS INCURRED<br>AND CONSIDERATION FOR<br>CLAIM                              | CONTINGENT<br>UNLIQUIDATED<br>DISPUTED | AMOUNT<br>OF<br>CLAIM | AMOUNT<br>ENTITLED TO<br>PRIORITY | AMOUNT<br>NOT<br>ENTITLED TO<br>PRIORITY, IF<br>ANY |
|--|-----------|--|--|-----------------------|-----------------------------------|---|
| ACCT #:<br><b>Dennise Hernandez Gruber</b><br><b>419 N. Magnolia Ave</b><br><b>Orlando, Florida 32801</b>  |           | DATE INCURRED: <b>01/04/2011</b><br>CONSIDERATION:<br><b>Attorney Fees</b><br>REMARKS: |  | <b>\$4,000.00</b>     | <b>\$4,000.00</b>                 | <b>\$0.00</b>                                       |
|  |           |  |  |                       |                                   |   |
|  |           |  |  |                       |                                   |   |
|  |           |  |  |                       |                                   |   |
|  |           |  |  |                       |                                   |   |
|  |           |  |  |                       |                                   |   |
|  |           |  |  |                       |                                   |   |
| Sheet no. <u>1</u> of <u>1</u> continuation sheets<br>attached to Schedule of Creditors Holding Priority Claims<br>Subtotals (Totals of this page) ><br>Total ><br>(Use only on last page of the completed Schedule E.<br>Report also on the Summary of Schedules.)<br>Totals ><br>(Use only on last page of the completed Schedule E.<br>If applicable, report also on the Statistical Summary<br>of Certain Liabilities and Related Data.) |           |  |  | <b>\$4,000.00</b>     | <b>\$4,000.00</b>                 | <b>\$0.00</b>                                       |
|  |           |  |  | <b>\$4,000.00</b>     |                                   |   |
|  |           |  |  |                       | <b>\$4,000.00</b>                 | <b>\$0.00</b>                                       |

**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,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)  | CODEBTOR | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION FOR<br>CLAIM.<br>IF CLAIM IS SUBJECT TO<br>SETOFF, SO STATE.             | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM |
|--|----------|--|------------|--------------|----------|--------------------|
| ACCT #: xxx3201<br><b>BANK OF AMERICA</b><br>2059 North Parkway 3rd Floor North<br>Tucker, GA 30084-5399       |          | DATE INCURRED:<br>CONSIDERATION:<br><b>Non-Purchase Money</b><br>REMARKS:  |            |              |          | <b>\$3,726.38</b>  |
| ACCT #: xxx3201<br><b>Bank of America</b><br>2059 Northlake Parkway<br>3rd Floor-North<br>Tucker, Ga 3008-5399 |          | DATE INCURRED: <b>08/09/2010</b><br>CONSIDERATION:<br><b>Non-Purchase Money</b><br>REMARKS:                              |            |              |          | <b>\$3,726.38</b>  |
| ACCT #:<br><b>M&amp;I MARSHALL &amp; ILSEY BANK</b><br>100 EAST PACKWOOD AVE<br>MAITLAND, FL 32751             |          | DATE INCURRED:<br>CONSIDERATION:<br><b>Credit Card</b><br>REMARKS:   |            |              |          | <b>\$16,822.00</b> |
| Representing:<br><b>M&amp;I MARSHALL &amp; ILSEY BANK</b>  |          | <b>Marvin L. Beaman Jr. Esq.</b><br>605 N. Wymore Road<br>Winter Park Fl 32789   |            |              |          | <b>Notice Only</b> |
| ACCT #:<br><b>Marvin L. Beaman Jr. Esq.</b><br>605 N. Wymore Road<br>Winter Park Fl 32789                      |          | DATE INCURRED:<br>CONSIDERATION:<br><b>Arrearage</b><br>REMARKS:<br><b>Attorney for M&amp;I Marshall and Ilsley Bank</b> |            |              |          | <b>\$0.00</b>      |
| ACCT #: x2262<br><b>McCarthy, Burgess &amp; Wolff</b><br>26000 Cannon Road<br>Cleveland, Ohio 44146            |          | DATE INCURRED:<br>CONSIDERATION:<br><b>Collecting for -Talking Phone Book</b><br>REMARKS:                                |            |              |          | <b>\$2,149.69</b>  |
| <b>Subtotal &gt;</b>   |          |  |            |              |          | <b>\$26,424.45</b> |
| <b>Total &gt;</b>  |          |  |            |              |          |                    |

(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.)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODEBTR |  | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION FOR<br>CLAIM.<br>IF CLAIM IS SUBJECT TO<br>SETOFF, SO STATE.                | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM  |
|---|---------|--|---|------------|--------------|----------|---------------------|
| ACCT #: xxxx-xxxx-xxxx-0881   |         |  | DATE INCURRED:<br>CONSIDERATION:<br><b>Non-Purchase Money</b><br>REMARKS:<br><b>signature loan</b>                          |            |              |          | <b>\$50,000.00</b>  |
| National City Bank<br>PO Box 36000<br>Louisville KY 40233   |         |  |   |            |              |          |                     |
| ACCT #: xxxxx7071   |         |  | DATE INCURRED:<br>CONSIDERATION:<br><b>Arrearage</b><br>REMARKS:<br><b>checking account ?</b>                               |            |              |          | <b>\$3,900.00</b>   |
| National City Bank<br>PO Box 36000<br>Louisville KY 40233   |         |  |   |            |              |          |                     |
| ACCT #: xxxxxxxxxxxxxxx1229   |         |  | DATE INCURRED:<br>CONSIDERATION:<br><b>Non-Purchase Money</b><br>REMARKS:   |            |              |          | <b>\$35,296.08</b>  |
| Regions Bank<br>Drawer 550<br>Post Office Box 11407<br>Birmingham, Alabama 35246-8651                         |         |  |   |            |              |          |                     |
| Representing:<br>Regions Bank   |         |  | <b>Regions Bank</b><br><b>Collection Support</b><br><b>Drawer 550</b><br><b>PO Box 11407</b><br><b>Birmingham, Al 35202</b> |            |              |          | <b>Notice Only</b>  |
| ACCT #:   |         |  | DATE INCURRED:<br>CONSIDERATION:<br><b>Purchase Money</b><br>REMARKS:   |            |              |          | <b>\$608,942.05</b> |
| Regions Bank<br>Drawer 550<br>Post Office Box 11407<br>Birmingham, Alabama 35246-8651                         |         |  |   |            |              |          |                     |
| Representing:<br>Regions Bank   |         |  | <b>Kevin Mangum</b><br><b>101 Sunnyside Rd</b><br><b>Ste 300</b><br><b>Casselberry fl 32707-3862</b>                        |            |              |          | <b>Notice Only</b>  |

Sheet no. 1 of 2 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

|                      |                     |
|----------------------|---------------------|
| <b>Subtotal &gt;</b> | <b>\$698,138.13</b> |
|----------------------|---------------------|

Total &gt;

(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.)

**\$698,138.13**

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

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODE | DEBTOR | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION FOR<br>CLAIM.<br>IF CLAIM IS SUBJECT TO<br>SETOFF, SO STATE.   | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM                    |
|---|------|--------|--|------------|--------------|----------|---------------------------------------|
| Representing:<br>Regions Bank   |      |        | Regions Bank<br>Collection Support<br>Drawer 550<br>PO Box 11407<br>Birmingham, Al 35202   |            |              |          | Notice Only                           |
|   |      |        |  |            |              |          |                                       |
|   |      |        |  |            |              |          |                                       |
|   |      |        |  |            |              |          |                                       |
|   |      |        |  |            |              |          |                                       |
|   |      |        |  |            |              |          |                                       |
| Sheet no. <u>2</u> of <u>2</u> continuation sheets attached to  |      |        |  |            |              |          | <b>Subtotal &gt;</b> <b>\$0.00</b>    |
| Schedule of Creditors Holding Unsecured Nonpriority Claims  |      |        |  |            |              |          |                                       |
|   |      |        | (Use only on last page of the completed Schedule F.)<br>(Report also on Summary of Schedules and, if applicable, on the<br>Statistical Summary of Certain Liabilities and Related Data.) |            |              |          | <b>Total &gt;</b> <b>\$724,562.58</b> |

In re **Kaplan Cosmetics Surgery 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. |
|---|--|
| <b>Avellino Development</b><br>2351 W. Eau Gallie Blvd<br>Melbourne, FL 32751         | Rent for the Melbourne Office<br>Contract to be ASSUMED  |
| <b>BANK OF AMERICA</b><br>2059 North Parkway 3rd Floor North<br>Tucker, GA 30084-5399 | Non-Purchase Money<br>Contract to be ASSUMED<br>Contract is in DEFAULT   |
| <b>Everbank</b><br>Dept # 1608<br>Denver Co<br>80291                                  | Equipment lease.<br>Contract # 40048219<br>Contract to be ASSUMED  |
| <b>Harmon Karis</b><br>1640 N. Maitland Ave<br>Maitland, FL 32751                     | Rent of building<br>Contract to be ASSUMED   |
| <b>Leaf Financial</b><br>PO Box 644006<br>Cincinnati OH 45264-4006                    | Equipment lease<br>contract # 03606057774-001<br>Contract to be ASSUMED  |



In re **Kaplan Cosmetics Surgery 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 |
|------------------------------|------------------------------|
|                              |                              |

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

In re **Kaplan Cosmetics Surgery 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<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS      | LIABILITIES  | OTHER        |     |
|---|----------------------|------------------|-------------|--------------|--------------|-----|
| A - Real Property   | Yes                  | 1                | \$0.00      |              |              |     |
| B - Personal Property   | Yes                  | 9                | \$12,385.00 |              |              |     |
| C - Property Claimed<br>as Exempt   | No                   |                  |             |              |              |     |
| D - Creditors Holding<br>Secured Claims   | Yes                  | 2                |             |              | \$130,646.28 |     |
| E - Creditors Holding Unsecured<br>Priority Claims<br>(Total of Claims on Schedule E) | Yes                  | 2                |             |              | \$4,000.00   |     |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                                 | Yes                  | 3                |             |              | \$724,562.58 |     |
| G - Executory Contracts and<br>Unexpired Leases                                       | Yes                  | 1                |             |              |              |     |
| H - Codebtors   | Yes                  | 1                |             |              |              |     |
| I - Current Income of<br>Individual Debtor(s)   | No                   |                  |             |              |              | N/A |
| J - Current Expenditures of<br>Individual Debtor(s)                                   | No                   |                  |             |              |              | N/A |
| TOTAL   |                      | 19               | \$12,385.00 | \$859,208.86 |              |     |

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

---

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

I, the President 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  
21 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 12/29/2010

Signature /s/ Barry J. Kaplan  
Barry J. Kaplan  
President

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

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

In re: **Kaplan Cosmetics Surgery 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                       |
|--------------|------------------------------|
| \$382,928.57 | 2010 Profit & Loss Statement |
|              | 2009 Tax 901,923.00          |
|              | 2008 Tax 629,892.00          |

**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 \$5,850\*. 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 4/01/13, 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.)

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

In re: **Kaplan Cosmetics Surgery Inc.**Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

*Continuation Sheet No. 1*

**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.)

| CAPTION OF SUIT AND<br>CASE NUMBER  | NATURE OF PROCEEDING   | COURT OR AGENCY<br>AND LOCATION   | STATUS OR<br>DISPOSITION   |
|---|--|---|--|
| <b>M &amp; I MARSHALL &amp; ILSLEY<br/>BANK<br/>V. KAPLAN COSMETIC SURGERY<br/>INC., AND BARRY J. KAPLAN</b>  | <b>DAMAGES,<br/>FORECLOSURE OF<br/>SECURITY INTEREST<br/>IN PERSONAL<br/>PROPERTY AND<br/>REPLEVIN</b> | <b>IN THE CIRCUIT COURT<br/>OF THE NINTH JUDICIAL<br/>CIRCUIT IN AND FLOR<br/>ORANGE COUNTY<br/>FLORIDA</b> | <b>Default was entered</b>   |
| <b>BANK OF AMERICA, N.A. vs<br/>KAPLAN COSMETIC SURGERY,<br/>INC., BARRY J. KAPLAN, an<br/>individual, M&amp;i CORPORATION,<br/>a foregin corporation, and<br/>CARDINAL HEALTH, INC., a<br/>foreign corporation</b> | <b>breach of contract</b>  | <b>2009-ca-022743-0</b>   | <b>Joint Stipulation For<br/>Entry Of Final<br/>Judgment was entered</b> |
| <b>Regions Bank<br/>Vs. Harmon Karis LLC et al<br/>Case No. 2010-CA-018292-0</b>  | <b>Breach of<br/>Agreement/Contract</b>  | <b>In the Circuit Court of<br/>the Ninth Judicial<br/>Circuit in and for<br/>Orange County Florida</b>      | <b>Final Judgement<br/>Entered</b>                                       |

- 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.)

**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.)

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

In re: **Kaplan Cosmetics Surgery Inc.**Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

*Continuation Sheet No. 2*

**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,<br>NAME OF PAYER IF<br>OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION<br>AND VALUE OF PROPERTY |
|---|---|---|
| Dennise Hernandez Gruber, Esq.<br>The Law Office of Dennise Hernandez Gruber,<br>Esq.<br>419 North Magnolia Ave, Orlando, Florida 32801 |   | 7000.00   |

**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.

**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.

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

In re: **Kaplan Cosmetics Surgery Inc.**Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

*Continuation Sheet No. 3*

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**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:

- 
- 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.

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

In re: **Kaplan Cosmetics Surgery Inc.**Case No. \_\_\_\_\_  
(if known)

**STATEMENT OF FINANCIAL AFFAIRS**

*Continuation Sheet No. 4*

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.

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****GVC Financial****978 Douglas Ave, Ste, 102 Altamonte springs FL  
32714****DATES SERVICES RENDERED****last Quickbooks reconciliation December 13,  
2010**

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.

**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.

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****Barry J. Kaplan D.O.****1640 N. Maitland Ave. Maitland FL 32751****TITLE****NATURE AND PERCENTAGE  
OF STOCK OWNERSHIP****100%**



UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION

In re: **Kaplan Cosmetics Surgery Inc.**

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

**STATEMENT OF FINANCIAL AFFAIRS**  
*Continuation Sheet No. 5*

---

**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 12/29/2010

Signature /s/ Barry J. Kaplan  
**Barry J. Kaplan**  
**President**

[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  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

IN RE: **Kaplan Cosmetics Surgery Inc.**

CASE NO

CHAPTER 11

**CHAPTER 11 STATEMENT OF INTENTION**

PART A -- Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

|  |   |
|--|---|
| Property No. 1   |   |
| <b>Creditor's Name:</b><br>Bank of America<br>2059 Northlake Parkway<br>3rd Floor-North<br>Tucker, Ga 3008-5399<br>xxx3201   | <b>Describe Property Securing Debt:</b><br>Non-Purchase Money |
| Property will be (check one):<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained<br><br>If retaining the property, I intend to (check at least one):<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input checked="" type="checkbox"/> Other. Explain (for example, avoid lien using 11 U.S.C. § 522(f)):<br>Debt will be reaffirmed for fair market value.<br><br><br>Property is (check one):<br><input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt |   |

  

|  |  |
|--|--|
| Property No. 2   |  |
| <b>Creditor's Name:</b><br>Bank of America<br>2059 Northlake parkway<br>3rd Floor<br>Tucker Ga 30084-5399  | <b>Describe Property Securing Debt:</b><br>equipment |
| Property will be (check one):<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained<br><br>If retaining the property, I intend to (check at least one):<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input checked="" type="checkbox"/> Other. Explain (for example, avoid lien using 11 U.S.C. § 522(f)):<br>Debt will be reaffirmed for fair market value.<br><br><br>Property is (check one):<br><input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt |  |

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

IN RE: **Kaplan Cosmetics Surgery Inc.**

CASE NO

CHAPTER 11

**CHAPTER 11 STATEMENT OF INTENTION***Continuation Sheet No. 1*

|  |   |
|--|---|
| Property No. 3   |   |
| <b>Creditor's Name:</b><br>M&I MARSHALL & ILSEY BANK<br>100 EAST PACKWOOD AVE<br>MAITLAND, FL 32751<br>0047754146-10000  | <b>Describe Property Securing Debt:</b><br>assets |
| Property will be (check one):<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained<br><br>If retaining the property, I intend to (check at least one):<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input checked="" type="checkbox"/> Other. Explain (for example, avoid lien using 11 U.S.C. § 522(f)):<br>Debt will be reaffirmed for fair market value.<br><br><br>Property is (check one):<br><input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt |   |

PART B -- Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

|   |   |  |
|---|---|--|
| Property No. 1  |   |  |
| <b>Lessor's Name:</b><br>Avellino Development<br>2351 W. Eau Gallie Blvd<br>Melbourne, FL 32751 | <b>Describe Leased Property:</b><br>Rent for the Melbourne Office | Lease will be Assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

|   |  |  |
|---|--|--|
| Property No. 2  |  |  |
| <b>Lessor's Name:</b><br>BANK OF AMERICA<br>2059 North Parkway 3rd Floor North<br>Tucker, GA 30084-5399 | <b>Describe Leased Property:</b><br>Non-Purchase Money | Lease will be Assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

IN RE: **Kaplan Cosmetics Surgery Inc.**

CASE NO

CHAPTER **11****CHAPTER 11 STATEMENT OF INTENTION***Continuation Sheet No. 2*

|  |   |  |
|--|---|--|
| Property No. 3   |   |  |
| <b>Lessor's Name:</b><br>Everbank<br>Dept # 1608<br>Denver Co<br>80291 | <b>Describe Leased Property:</b><br>Equipment lease.<br>Contract # 40048219 | Lease will be Assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br><br>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

  

|   |  |  |
|---|--|--|
| Property No. 4  |  |  |
| <b>Lessor's Name:</b><br>Harmon Karis<br>1640 N. Maitland Ave<br>Maitland, FL 32751 | <b>Describe Leased Property:</b><br>Rent of building | Lease will be Assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br><br>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

  

|  |   |  |
|--|---|--|
| Property No. 5   |   |  |
| <b>Lessor's Name:</b><br>Leaf Financial<br>PO Box 644006<br>Cincinnati OH 45264-4006 | <b>Describe Leased Property:</b><br>Equipment lease<br>contract # 03606057774-001 | Lease will be Assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br><br>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

**I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.**

Date 12/29/2010
 Signature /s/ Barry J. Kaplan  
**Barry J. Kaplan**  
**President**

Date \_\_\_\_\_

Signature \_\_\_\_\_

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

IN RE: **Kaplan Cosmetics Surgery Inc.**

CASE NO

CHAPTER 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

|  |                   |
|--|-------------------|
| For legal services, I have agreed to accept:           | <u>\$7,000.00</u> |
| Prior to the filing of this statement I have received: | <u>\$3,000.00</u> |
| Balance Due:   | <u>\$4,000.00</u> |

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

12/29/2010

*Date*

/s/ Dennise Hernandez Gruber

*Dennise Hernandez Gruber* Bar No. 0494771  
The Law Office of Dennise Hernandez Gruber  
419 N. Magnolia Ave  
Orlando, Florida 32801  
Phone: (407) 872-6061

/s/ Barry J. Kaplan

**Barry J. Kaplan**  
**President**

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

IN RE: **Kaplan Cosmetics Surgery Inc.**

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)   |
|---|---|--|---|---|
| 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] |
| Regions Bank<br>Drawer 550<br>Post Office Box 11407<br>Birmingham, Alabama 35246-8651 |   | Purchase Money   |   | <b>\$608,942.05</b>                                       |
| Bank of America<br>2059 Northlake parkway<br>3rd Floor<br>Tucker Ga 30084-5399        |   | Purchase Money   |   | <b>\$80,667.60</b><br><b>Value: \$0.00</b>                |
| National City Bank<br>PO Box 36000<br>Louisville KY 40233                             |   | Non-Purchase Money   |   | <b>\$50,000.00</b>  |
| M&I MARSHALL & ILSEY BANK<br>100 EAST PACKWOOD AVE<br>MAITLAND, FL 32751              |   | Arrearage  |   | <b>\$49,978.68</b><br><b>Value: \$12,902.00</b>           |
| Regions Bank<br>Drawer 550<br>Post Office Box 11407<br>Birmingham, Alabama 35246-8651 |   | Non-Purchase Money   |   | <b>\$35,296.08</b>  |
| M&I MARSHALL & ILSEY BANK<br>100 EAST PACKWOOD AVE<br>MAITLAND, FL 32751              |   | Credit Card  |   | <b>\$16,822.00</b>  |

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

IN RE: **Kaplan Cosmetics Surgery Inc.**

Case No.

Chapter **11**

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

*Continuation Sheet No. 1*

| (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] |
| Dennise Hernandez Gruber<br>419 N. Magnolia Ave<br>Orlando, Florida 32801            |   | Attorney Fees  |   | <b>\$4,000.00</b>   |
| National City Bank<br>PO Box 36000<br>Louisville KY 40233                            |   | Arrearage  |   | <b>\$3,900.00</b>   |
| Bank of America<br>2059 Northlake Parkway<br>3rd Floor-North<br>Tucker, Ga 3008-5399 |   | Non-Purchase Money   |   | <b>\$3,726.38</b>   |
| BANK OF AMERICA<br>2059 North Parkway 3rd Floor<br>North<br>Tucker, GA 30084-5399    |   | Non-Purchase Money   |   | <b>\$3,726.38</b>   |
| McCarthy, Burgess & Wolff<br>26000 Cannon Road<br>Cleveland, Ohio 44146              |   | Collecting for -Talking Phone Book                                 |   | <b>\$2,149.69</b>   |
| Marvin L. Beaman Jr. Esq.<br>605 N. Wymore Road<br>Winter Park Fl 32789              |   | Arrearage  |   | <b>\$0.00</b>   |

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION**

IN RE: **Kaplan Cosmetics Surgery Inc.**

Case No.

Chapter **11**

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

*Continuation Sheet No. 2*

**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: 12/29/2010

Signature: /s/ Barry J. Kaplan  
**Barry J. Kaplan**  
**President**



UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION

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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 12/29/2010

Signature /s/ Barry J. Kaplan  
**Barry J. Kaplan**  
**President**

Date \_\_\_\_\_

Signature \_\_\_\_\_

/s/ Dennise Hernandez Gruber  
**Dennise Hernandez Gruber**  
**0494771**  
**The Law Office of Dennise Hernandez Gruber**  
**419 N. Magnolia Ave**  
**Orlando, Florida 32801**  
**(407) 872-6061**

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Avellino Development  
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Marvin L. Beaman Jr.  
Marvin L. Beaman, JR. PA  
605 N. Wymore Road  
Winter Park, FL 32789-2893

BANK OF AMERICA  
2059 North Parkway 3rd Floor No  
Tucker, GA 30084-5399

Marvin L. Beaman Jr. Esq.  
605 N. Wymore Road  
Winter Park Fl 32789

Bank of America  
2059 Northlake Parkway  
3rd Floor-North  
Tucker, Ga 3008-5399

McCarthy, Burgess &Wolff  
26000 Cannon Road  
Cleveland, Ohio 44146

Bank of America  
2059 Northlake parkway  
3rd Floor  
Tucker Ga 30084-5399

National City Bank  
PO Box 36000  
Louisville KY 40233

Dennise Hernandez Gruber  
419 N. Magnolia Ave  
Orlando, Florida 32801

Regions Bank  
Drawer 550  
Post Office Box 11407  
Birmingham, Alabama 35246-8651

Everbank  
Dept # 1608  
Denver Co  
80291

Regions Bank  
Collection Support  
Drawer 550  
PO Box 11407  
Birmingham, Al 35202

Harmon Karis  
1640 N. Maitland Ave  
Maitland, Fl 32751

Kevin Mangum  
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Casselberry fl 32707-3862

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