

**United States Bankruptcy Court
EASTERN DISTRICT OF MICHIGAN**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Horizon Dental, PLLC, a Corporation	Name of Joint Debtor (Spouse)(Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): aka All About Smiles	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 38-3675998	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):
Street Address of Debtor (No. & Street, City, and State): 42180 Ford Road, Ste. 301 Canton MI	Street Address of Joint Debtor (No. & Street, City, and State):
ZIP CODE 48187	ZIP CODE
County of Residence or of the Principal Place of Business: Wayne	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): 29080 Forest Hill Drive Farmington Hills MI	Mailing Address of Joint Debtor (if different from street address):
ZIP CODE 48331	ZIP CODE
Location of Principal Assets of Business Debtor (if different from street address above): SAME	ZIP CODE

Type of Debtor (Form of organization) (Check one box.) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (if debtor is not one of the above entities, check this box and state type of entity below _____	Nature of Business (Check one box.) <input checked="" type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose" <input checked="" type="checkbox"/> Debts are primarily business debts. <hr/> Chapter 11 Debtors: Check one box: <input checked="" type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <hr/> Check if: <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		

Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <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
Estimated Number of Creditors <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	
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input checked="" 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	
Estimated Liabilities <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	

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): Horizon Dental, PLLC, a Corporation	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)		
Location Where Filed: NONE	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)		
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
<p style="text-align:center;">Exhibit A</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><input checked="" type="checkbox"/> Exhibit A is attached and made a part of this petition</p>	<p style="text-align:center;">Exhibit B</p> (To be completed if debtor is an individual whose debts are primarily consumer debts) 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 style="text-align:center;">X</p> <hr style="width:100%;"/> <div style="display: flex; justify-content: space-between;"> Signature of Attorney for Debtor(s) Date </div>	
Exhibit C		
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?		
<input type="checkbox"/> Yes, and exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		
Exhibit D		
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)		
<input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.		
Information Regarding the Debtor - Venue (Check any applicable box)		
<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. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <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 proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.		
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)		
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)		
_____ (Name of landlord that obtained judgment)		
_____ (Address of landlord)		
<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 <input type="checkbox"/> Debtor has included with 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. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).		

<p>Voluntary Petition <i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): Horizon Dental, PLLC, a Corporation</p>
Signatures	
<p style="text-align: center;">Signature(s) of Debtor(s) (Individual/Joint)</p> <p>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.</p> <p>[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)</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><input checked="" type="checkbox"/> _____ Signature of Debtor</p> <p><input checked="" type="checkbox"/> _____ Signature of Joint Debtor</p> <p>_____ Telephone Number (if not represented by attorney)</p> <p>_____ Date</p>	<p style="text-align: center;">Signature of a Foreign Representative</p> <p>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.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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.</p> <p><input checked="" type="checkbox"/> _____ (Signature of Foreign Representative)</p> <p>_____ (Printed name of Foreign Representative)</p> <p>_____ (Date)</p>
<p><input checked="" type="checkbox"/> _____ Signature of Attorney*</p> <p>Robert A. Peurach P34446 Printed Name of Attorney for Debtor(s)</p> <p>DAKMAK PEURACH, P.C. Firm Name</p> <p>615 Griswold, Ste. 600 Address</p> <p>_____ Detroit MI 48226</p> <p>313-964-0800 Telephone Number</p> <p>1/25/08 Date</p> <p><small>*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.</small></p>	<p style="text-align: center;">Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>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.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ 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.)</p> <p>_____ Address</p> <p>_____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>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.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>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.</small></p>
<p style="text-align: center;">Signature of Debtor (Corporation/Partnership)</p> <p>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.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><input checked="" type="checkbox"/> _____ Signature of Authorized Individual</p> <p>Marc H. Salah Printed Name of Authorized Individual</p> <p>Member Title of Authorized Individual</p> <p>1/25/08 Date</p>	<p><input checked="" type="checkbox"/> _____ Date</p>

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION**

In re *Horizon Dental, PLLC, a Corporation*
aka All About Smiles

Case No.
Chapter 11

_____/ Debtor

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 must also 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 (Yes/No)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	<i>Yes</i>	<i>1</i>	\$ <i>0.00</i>		
B-Personal Property	<i>Yes</i>	<i>3</i>	\$ <i>99,000.00</i>		
C-Property Claimed as Exempt	<i>No</i>	<i>0</i>			
D-Creditors Holding Secured Claims	<i>Yes</i>	<i>1</i>		\$ <i>732,073.76</i>	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	<i>Yes</i>	<i>2</i>		\$ <i>14,431.73</i>	
F-Creditors Holding Unsecured Nonpriority Claims	<i>Yes</i>	<i>6</i>		\$ <i>76,480.93</i>	
G-Executory Contracts and Unexpired Leases	<i>Yes</i>	<i>1</i>			
H-Codebtors	<i>Yes</i>	<i>4</i>			
I-Current Income of Individual Debtor(s)	<i>No</i>	<i>0</i>			\$ <i>0.00</i>
J-Current Expenditures of Individual Debtor(s)	<i>No</i>	<i>0</i>			\$ <i>0.00</i>
TOTAL		<i>18</i>	\$ <i>99,000.00</i>	\$ <i>822,986.42</i>	

In re Horizon Dental, PLLC

Debtor(s)

Case No. _____

(if known)

SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband—H Wife—W Joint—J Community—C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
None				None
TOTAL \$			0.00	

No continuation sheets attached

(Report also on Summary of Schedules.)

In re Horizon Dental, PLLC

Case No. _____

Debtor(s)

(if known)

SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply 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).

Type of Property	None	Description and Location of Property	Husband—H Wife—W Joint—J Community—C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.		<i>Cash</i> <i>Location: In debtor's possession</i>		\$ 3,000.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<i>Comerica Checking Account</i> <i>Location: In debtor's possession</i>		\$ 2,000.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.	X			
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.	X			
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interest 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).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			

In re Horizon Dental, PLLC

Case No. _____
(if known)

Debtor(s)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N o n e	Description and Location of Property	Current Value	
			of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts Receivable.		<i>Accounts receivable (face value \$120,000.00) Location: In debtor's possession</i>		<i>\$ 70,000.00</i>
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
20. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
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.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as described 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.	X			
25. Automobiles, trucks, trailers and other vehicles and accessories.	X			
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		<i>Office Equipment and Supplies Location: In debtor's possession</i>		<i>\$ 2,000.00</i>
29. Machinery, fixtures, equipment and supplies used in business.		<i>Machinery & Equipment Location: In debtor's possession</i>		<i>\$ 20,000.00</i>

In re Horizon Dental, PLLC

Case No. _____

Debtor(s)

(if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	None	Description and Location of Property	Husband-H Wife-W Joint-J Community-C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
30. Inventory.		Inventory Location: In debtor's possession		\$ 2,000.00
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			

Total → \$ 99,000.00

(Report total also on Summary of Schedules.)
 Include amounts from any continuation sheets attached.

In re Horizon Dental, PLLC
Debtor(s)

Case No. _____
(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the 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). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

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 Account Number (See Instructions Above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if Any
Account No: Creditor # : 1 HPSE/GE Health P.O. Box 414418 Boston MA 02241-4418	X	2006 <i>Sec. int. in all assets</i> Value: \$ 99,000.00				\$ 5,073.76	\$ 5,073.76
Account No: 0698 Creditor # : 2 Matsco Financial 2000 Powell St., 4th Floor Emeryville CA 94608	X	2005 <i>Sec. interest in all assets</i> Value: \$ 99,000.00				\$ 727,000.00	\$ 628,000.00
Account No:		 Value:					
Subtotal \$ (Total of this page)						\$ 732,073.76	\$ 633,073.76
Total \$ (Use only on last page)						\$ 732,073.76	\$ 633,073.76

No continuation sheets attached

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data)

In re Horizon Dental, PLLC,
Debtor(s)Case No. _____
(if known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is 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).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

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 \$10,950* 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 \$5,400* 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 \$2,425* 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 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).

mounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

In re Horizon Dental, PLLC,
Debtor(s)

Case No. _____
(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet: **Taxes and Certain Other Debts Owed to Governmental Units**

Creditor's Name, Mailing Address Including ZIP Code, and Account Number <i>(See instructions above.)</i>	Co-Debtor	Date Claim was Incurred and Consideration for Claim	Contingent	Unliquidated	Disputed	Amount of Claim	Amount Entitled to Priority	Amount not Entitled to Priority, if any
Account No: <u>1000</u> Creditor # : <u>1</u> Canton Twp. Treasurer 1150 Canton Center Road Canton MI 48188	X	2007 Summer/winter taxes				\$ 2,431.73	\$ 2,431.73	\$ 0.00
Account No: Creditor # : <u>2</u> SBSE/Insolvency Unit Internal Revenue Service Box 330500-Stop 15 Detroit MI 48232		4th Qtr. 2007 & 1/08 withholding tax				\$ 8,000.00	\$ 8,000.00	\$ 0.00
Account No: Creditor # : <u>3</u> State of Michigan Dept. of Treas./Collection Div P.O. Box 30158 Lansing MI 48909		4th Qtr. 2007 & 1/08 withholding tax				\$ 4,000.00	\$ 4,000.00	\$ 0.00
Account No:								
Account No:								
Account No:								

Sheet No. 1 of 1 continuation sheets attached
to Schedule of Creditors Holding Priority Claims

	Subtotal \$ (Total of this page)	14,431.73	14,431.73	0.00
Total \$ <small>(Use only on last page of the completed Schedule E. Report total also on Summary of Schedules)</small>		14,431.73	14,431.73	0.00
Total \$ <small>(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)</small>		14,431.73	14,431.73	0.00

In re Horizon Dental, PLLC, Debtor(s)

Case No. _____ (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is 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). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Creditor's Name, Mailing Address including Zip Code, And Account Number <i>(See instructions above.)</i>	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: _____ Creditor # : 1 American Express c/o Weltman Weinberg 175 S. 3rd St., Ste. 900 Columbus OH 43215	X	various dates Charges				\$ 15,863.00
Account No: 4753 Creditor # : 2 Brasseler P.O. Box 791249 Baltimore MI 21279-1249	X	various dates Services				\$ 304.28
Account No: 7313 Creditor # : 3 Cavalier Bus. Communications P.O. Box 77000 Dept. 77000 Detroit MI 48277-0728	X	various dates Services				\$ 1,305.05
Account No: _____ Creditor # : 4 Cavalier Phone 3300 North Pace Blvd. Pensacola FL 32505-5148	X	various dates Services				\$ 2,140.83
Subtotal \$						\$ 19,613.16
Total \$						

5 continuation sheets attached

(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)

In re Horizon Dental, PLLC, Debtor(s)

Case No. _____ (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 9791 Creditor # : 5 Cerinate Corporation P.O. Box 1729 Santa Maria CA 93456	X	various dates Services				\$ 448.10
Account No: 4027 Creditor # : 6 Comcast P.O. Box 8009c Plymouth MI 48170	X	various dates Services				\$ 380.00
Account No: 4529 Creditor # : 7 Den Mat Holdings P.O. Box 1729 Santa Maria CA 93456	X	various dates Services				\$ 448.10
Account No: marc Creditor # : 8 Dental Art Laboratory, Inc. 1721 N.Grand River Ave. Lansing MI 48906	X	various dates Services				\$ 4,164.87
Account No: 9370 Creditor # : 9 Dental Creations, Inc. 56766 Grand River Ave. New Hudson MI 48165	X	various dates Services				\$ 4,000.00
Account No: n/a Creditor # : 10 Dentek, Inc. 8056 Reeder Road Lenexa KS 66214	X	various dates Services				\$ 1,227.14

Sheet No. 1 of 5 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 10,668.21**

Total \$

(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)

In re Horizon Dental, PLLC, Debtor(s)

Case No. _____ (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor H-Husband W-Wife J-Joint C-Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 0016 Creditor # : 11 DTE Energy P.O. Box 2859 Detroit MI 48260-0001	X	various dates Utilities				\$ 486.28
Account No: SALA Creditor # : 12 Expertec Lab 200 N. Wayne Road Westland MI 48185-3626	X	various dates Services				\$ 2,200.00
Account No: n/a Creditor # : 13 Komet 4454 South Anderson Rd. Suite 14 Rock Hill SC 29730	X	various dates Services				\$ 362.68
Account No: 4529 Creditor # : 14 Lumineers P.O. Box 1729 Santa Maria CA 90074	X	2007 Services				\$ 448.00
Account No: Creditor # : 15 Mason Lab 12752 Stark Livonia MI 48150	X	various dates Services				\$ 1,000.00
Account No: 0250 Creditor # : 16 Med Art P.O. Box 37647 Philadelphia PA 19101-0647	X	various dates Services				\$ 194.47

Sheet No. 2 of 5 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 4,691.43**

Total \$

(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)

In re Horizon Dental, PLLC, Debtor(s)

Case No. _____ (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 8203 Creditor # : 17 Midwest Waste 1924 E. 177 St. Lansing MI 60438	X	various dates Services				\$ 115.00
Account No: 4652 Creditor # : 18 Orapharma 12914 Collections Center Drive Chicago IL 60693	X	various dates Services				\$ 450.86
Account No: 4770 Creditor # : 19 PAI P.O. Box 60 De Pere WI 54115		2007 Services				\$ 649.52
Account No: Creditor # : 20 Paragon Recovery P.O. Box 962 Coraopolis PA 15108	X	2007 workers comp. deductible				\$ 1,000.00
Account No: 6757 Creditor # : 21 Patterson Dental Fin. Serv. 1031 Mendota Hghts. Rd. St. Paul MN 55120	X	various dates Services				\$ 15,000.00
Account No: 3489 Creditor # : 22 Payroll One P.O. Box 1167 Royal Oak MI 48068	X	various dates Services				\$ 646.18

Sheet No. 3 of 5 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 17,861.56**

Total \$

(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)

In re Horizon Dental, PLLC, Debtor(s)

Case No. _____ (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 0002 Creditor # : 23 PDT Therapeutics P.O. Box 4160 Batesville AR 72503	X	various dates Services				\$ 61.00
Account No: 3381 Creditor # : 24 Pro Assurance 12498 Collection Center Drive Chicago IL 60693-0124	X	various dates Insurance				\$ 3,400.00
Account No: SALA Creditor # : 25 Professional Dental Studio Inc 6400 N. Hix Road Westland MI 48185	X	various dates Services				\$ 4,019.39
Account No: 5199 Creditor # : 26 Pronational Insurance Co. P.O. Box 590009 Birmingham AL 35259	X	various dates Insurance				\$ 2,110.00
Account No: 1156 Creditor # : 27 Quantum 452 Northco Drive, #180 Minneapolis MN 55432-3306	X	various dates Services				\$ 214.10
Account No: 0041 Creditor # : 28 Quill P.O. Box 94081 Palantine IL 60094-4081	X	various dates Services				\$ 401.97

Sheet No. 4 of 5 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 10,206.46**

Total \$

(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)

In re Horizon Dental, PLLC, Debtor(s)

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 08-4 Creditor # : 29 RDK Collection Services 2899 E. Big Beaver Road PMB 313 Troy MI 48083		For Notice Purposes Only				\$ 0.00
Account No: Creditor # : 30 Roy Sgroi, Esq. 12845 Farmington Rd, Ste. 1 Livonia MI 48150		For Informational Purposes Only				\$ 0.00
Account No: Creditor # : 31 Servant Properties 42180 Ford Road, Ste. 101 Canton MI 48187	X	2007 Rent				\$ 8,000.00
Account No: 9125 Creditor # : 32 Sunstar Americas, Inc. 4635 W. Foster Ave. Chicago IL 60630-1709	X	various dates Services				\$ 214.49
Account No: 2384 Creditor # : 33 Transworld Collection/Val Pak 30600 Telegraph Road Ste. 4215 Bingham Farms MI 48025	X	various dates Advertising				\$ 560.00
Account No: 1456 Creditor # : 34 Yellowbook 6300 C Street SW Cedar Rapids IA 52404	X	various dates Advertising				\$ 4,665.62

Sheet No. 5 of 5 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$	\$ 13,440.11
Total \$	\$ 76,480.93

(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)

In re Horizon Dental, PLLC / Debtor 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 the nature of debtor's interests 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 or 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 the 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.
<p><i>Servant Properties</i> 42180 Ford Road Ste. 101 Canton MI 48187</p>	<p>Contract Type: <i>oral month to month</i> Terms: <i>monthly rate of \$3,800.00</i> Beginning date: Debtor's Interest: Description: <i>Lease of Business premises</i> Buyout Option:</p>

In re Horizon Dental, PLLC

/ Debtor

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 debtors 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 the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor
<p>Marc Salah 29080 Forest Hill Drive Farmington Hills MI 48331</p>	<p>American Express c/o Weltman Weinberg 175 S. 3rd St., Ste. 900 Columbus OH 43215</p> <p>Brasseler P.O. Box 791249 Baltimore MI 21279-1249</p> <p>Canton Twp. Treasurer 1150 Canton Center Road Canton MI 48188</p> <p>Cavalier Bus. Communications P.O. Box 77000 Dept. 77000 Detroit MI 48277-0728</p> <p>Cavalier Phone 3300 North Pace Blvd. Pensacola FL 32505-5148</p> <p>Cerinate Corporation P.O. Box 1729 Santa Maria CA 93456</p> <p>Comcast P.O. Box 8009c Plymouth MI 48170</p> <p>Den Mat Holdings P.O. Box 1729 Santa Maria CA 93456</p> <p>Dental Art Laboratory, Inc. 1721 N. Grand River Ave. Lansing MI 48906</p>

In re Horizon Dental, PLLC

/ Debtor

Case No. _____

(if known)

SCHEDULE H-CODEBTORS

Name and Address of Codebtor	Name and Address of Creditor
<p>Marc Salah...continued</p>	<p>Dental Creations, Inc. 56766 Grand River Ave. New Hudson MI 48165</p>
	<p>Dentek, Inc. 8056 Reeder Road Lenexa KS 66214</p>
	<p>DTE Energy P.O. Box 2859 Detroit MI 48260-0001</p>
	<p>Expertec Lab 200 N. Wayne Road Westland MI 48185-3626</p>
	<p>HPSE/GE Health P.O. Box 414418 Boston MA 02241-4418</p>
	<p>Komet 4454 South Anderson Rd. Suite 14 Rock Hill SC 29730</p>
	<p>Lumineers P.O. Box 1729 Santa Maria CA 90074</p>
	<p>Mason Lab 12752 Stark Livonia MI 48150</p>
	<p>Matsco Financial 2000 Powell St., 4th Floor Emeryville CA 94608</p>
	<p>Med Art P.O. Box 37647 Philadelphia PA 19101-0647</p>
<p>Midwest Waste 1924 E. 177 St. Lansing MI 60438</p>	

In re Horizon Dental, PLLC

/ Debtor

Case No. _____

(if known)

SCHEDULE H-CODEBTORS

Name and Address of Codebtor	Name and Address of Creditor
<p><i>Marc Salah...continued</i></p>	<p>Orapharma 12914 Collections Center Drive Chicago IL 60693</p> <p>Paragon Recovery P.O. Box 962 Coraopolis PA 15108</p> <p>Patterson Dental Fin. Serv. 1031 Mendota Hghts. Rd. St. Paul MN 55120</p> <p>Payroll One P.O. Box 1167 Royal Oak MI 48068</p> <p>PDT Therapeutics P.O. Box 4160 Batesville AR 72503</p> <p>Pro Assurance 12498 Collection Center Drive Chicago IL 60693-0124</p> <p>Professional Dental Studio Inc 6400 N. Hix Road Westland MI 48185</p> <p>Pronational Insurance Co. P.O. Box 590009 Birmingham AL 35259</p> <p>Quantum 452 Northco Drive, #180 Minneapolis MN 55432-3306</p> <p>Quill P.O. Box 94081 Palantine IL 60094-4081</p> <p>Servant Properties 42180 Ford Road, Ste. 101 Canton MI 48187</p> <p>Sunstar Americas, Inc. 4635 W. Foster Ave. Chicago IL 60630-1709</p>

In re Horizon Dental, PLLC / Debtor

Case No. _____
(if known)

SCHEDULE H-CODEBTORS

Name and Address of Codebtor	Name and Address of Creditor
<i>Marc Salah...continued</i>	<i>Transworld Collection/Val Pak 30600 Telegraph Road Ste. 4215 Bingham Farms MI 48025 Yellowbook 6300 C Street SW Cedar Rapids IA 52404</i>

In re Horizon Dental, PLLC, a Corporation
Debtor

Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY ON BEHALF OF A CORPORATION

I, Marc H. Salah, Member 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 19 sheets,
and that they are true and correct to the best of my knowledge, information, and belief.

Date: 1/25/8

Signature 
Name: Marc H. Salah
Title: Member

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

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

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION**

In re: *Horizon Dental, PLLC, a Corporation*
aka All About Smiles

Case No.

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, 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).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more 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 full-time or part-time. An individual debtor may also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101.

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
2005 - \$516,344.00	services rendered
2006 - \$640,000.00	services rendered
2007 - \$650,000.00	services rendered

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, 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

None Complete a. or b., as appropriate, and c.

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 creditor 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 this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. 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 creditor 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.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
<i>Servant Properties 42180 Ford Road, Ste. 101 Canton, MI 48187</i>	<i>10/07 & 1/18/08</i>	<i>\$17,000.00</i>	<i>continuing monthly rent of \$3,800.00</i>

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.)

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.)

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.)

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, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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See Rule 2016 Statement

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.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
<i>Comerica Bank</i>	<i>Business Savings Account \$0.00 balance</i>	<i>09/07</i>

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.

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

None 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 hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law:

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.

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	DATES SERVICES RENDERED
<i>Patrick Heffernan, CPA 30201 Orchard Lake Road, Ste. 125 Farmington Hills, MI 48334</i>	<i>2007</i>
<i>Cedric Fails 19151 Grand River Ave. Detroit, MI 48223</i>	<i>2005 - 2006</i>

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.

NAME	ADDRESS
<i>Marc Salah</i>	<i>29080 Forest Hill Drive Farmington Hills, MI 48331</i>

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	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
<i>Marc Salah 29080 Forest Hill Drive Farmington Hills, MI 48331</i>	<i>sole member</i>	<i>100%</i>

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 distribution 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.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Marc Salah 29080 Forest Hill Drive Farmington Hills, MI 48331	Over the last year, Mr. Salah received distributions from the corporation on an intermittent basis.	Approximately \$9,000.00 monthly

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 1/25/18

Signature 
Marc H. Salah Member
Print Name and Title

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

____ continuation sheets attached

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
FOR THE EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

In re Horizon Dental, PLLC

Case No.
Chapter 11
Hon.

_____/ Debtor

STATEMENT OF ATTORNEY FOR DEBTOR(S)
PURSUANT TO F.R.BANKR.P.2016(b)

The undersigned, pursuant to F.R.Bankr.P.2016(b), states that:

The undersigned is the attorney for the Debtor(s) in this case.

The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]

FLAT FEE

- A. For legal services rendered in contemplation of and in connection with this case, exclusive of the filing fee paid _____
- B. Prior to filing this statement, received _____
- C. The unpaid balance due and payable is _____

RETAINER

- A. Amount of retainer received _____ \$5,000.00
- B. The undersigned shall bill against the retainer at an hourly rate of retained retainer. [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.
- \$ 1,039.00 of the filing fee has been paid.

In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.] (See attached Retainer Agreement)

- 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, statement 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;~~
- D. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
- E. Reaffirmations;
- F. Redemptions;
- G. Other: _____


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

The source of the payments to the undersigned was from:

- A. _____ Debtor(s)' earnings, wages, compensation for services performed
- B. _____ Other (describe, including the identify of payor) _____

The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or corporation, any compensation paid or to paid except as follows:

Dated: 1/25/08



Attorney for the Debtor(s)

Agreed: _____
Debtor



Debtor

American Express
c/o Weltman Weinberg
175 S. 3rd St., Ste. 900
Columbus, OH 43215

Brasseler
P.O. Box 791249
Baltimore, MI 21279-1249

Canton Twp. Treasurer
1150 Canton Center Road
Canton, MI 48188

Cavalier Bus. Communications
P.O. Box 77000
Dept. 77000
Detroit, MI 48277-0728

Cavalier Phone
3300 North Pace Blvd.
Pensacola, FL 32505-5148

Cerinate Corporation
P.O. Box 1729
Santa Maria, CA 93456

Comcast
P.O. Box 8009c
Plymouth, MI 48170

Den Mat Holdings
P.O. Box 1729
Santa Maria, CA 93456

Dental Art Laboratory, Inc.
1721 N. Grand River Ave.
Lansing, MI 48906

Dental Creations, Inc.
56766 Grand River Ave.
New Hudson, MI 48165

Dentek, Inc.
8056 Reeder Road
Lenexa, KS 66214

DTE Energy
P.O. Box 2859
Detroit, MI 48260-0001

Expertec Lab
200 N. Wayne Road
Westland, MI 48185-3626

HPSE/GE Health
P.O. Box 414418
Boston, MA 02241-4418

Komet
4454 South Anderson Rd.
Suite 14
Rock Hill, SC 29730

Lumineers
P.O. Box 1729
Santa Maria, CA 90074

Marc Salah
29080 Forest Hill Drive
Farmington Hills, MI 48331

Mason Lab
12752 Stark
Livonia, MI 48150

Matsco Financial
2000 Powell St., 4th Floor
Emeryville, CA 94608

Med Art
P.O. Box 37647
Philadelphia, PA 19101-0647

Midwest Waste
1924 E. 177 St.
Lansing, MI 60438

Orapharma
12914 Collections Center Drive
Chicago, IL 60693

PAI
P.O. Box 60
De Pere, WI 54115

Paragon Recovery
P.O. Box 962
Coraopolis, PA 15108

Patterson Dental Fin. Serv.
1031 Mendota Hghts. Rd.
St. Paul, MN 55120

Payroll One
P.O. Box 1167
Royal Oak, MI 48068

PDT Therapeutics
P.O. Box 4160
Batesville, AR 72503

Pro Assurance
12498 Collection Center Drive
Chicago, IL 60693-0124

Professional Dental Studio Inc
6400 N. Hix Road
Westland, MI 48185

Pronational Insurance Co.
P.O. Box 590009
Birmingham, AL 35259

Quantum
452 Northco Drive, #180
Minneapolis, MN 55432-3306

Quill
P.O. Box 94081
Palantine, IL 60094-4081

RDK Collection Services
2899 E. Big Beaver Road
PMB 313
Troy, MI 48083

Roy Sgroi, Esq.
12845 Farmington Rd, Ste. 1
Livionia, MI 48150

SBSE/Insolvency Unit
Internal Revenue Service
Box 330500-Stop 15
Detroit, MI 48232

Servant Properties
42180 Ford Road, Ste. 101
Canton, MI 48187

State of Michigan
Dept. of Treas./Collection Div
P.O. Box 30158
Lansing, MI 48909

Sunstar Americas, Inc.
4635 W. Foster Ave.
Chicago, IL 60630-1709

Transworld Collection/Val Pak
30600 Telegraph Road
Ste. 4215
Bingham Farms, MI 48025

U.S. Trustee
211 W. Fort Street, 7th Floor
Detroit, MI 48226

Yellowbook
6300 C Street SW
Cedar Rapids, IA 52404