

B1 (Official Form 1) (4/10)

United States Bankruptcy Court District of New Jersey		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Frank R. DePaola DDS Associates, LLC		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): None		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): EIN: 22-3656353		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State) 1130 Maxwell Lane Hoboken, NJ <div style="text-align: right;">ZIPCODE 07030</div>		Street Address of Joint Debtor (No. and Street, City, and State) <div style="text-align: right;">ZIPCODE</div>
County of Residence or of the Principal Place of Business: Hudson		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIPCODE</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIPCODE</div>
Location of Principal Assets of Business Debtor (if different from street address above):		<div style="text-align: right;">ZIPCODE</div>
<b>Type of Debtor</b> (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.)  _____	<b>Nature of Business</b> (Check one box)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  _____  <b>Tax-Exempt Entity</b> (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)	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (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  <b>Nature of Debts</b> (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
<b>Filing Fee</b> (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 No. 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.		<b>Check one box: Chapter 11 Debtors</b> <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input checked="" type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) <b>Check if:</b> <input 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). <b>Check all applicable boxes</b> <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, in accordance with 11 U.S.C. § 1126(b).
<b>Statistical/Administrative Information</b> <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
<b>Estimated Number of Creditors</b> <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1000-5000 <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> <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> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

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<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Frank R. DePaola DDS Associates, LLC</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed:	NONE	Case Number:	Date Filed:
Location Where Filed:	N.A.	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:	NONE	Case Number:	Date Filed:
District:		Relationship:	Judge:
<b>Exhibit A</b>		<b>Exhibit B</b>	
(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)		(To be completed if debtor is an individual whose debts are primarily consumer debts)	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).	
		X _____ Signature of Attorney for Debtor(s) Date	
<b>Exhibit C</b>			
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			
<b>Exhibit D</b>			
(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 a 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.			
<b>Information Regarding the Debtor - Venue</b>			
(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 or proceeding [in 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.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b>			
(Check all applicable boxes)			
<input type="checkbox"/> Landlord has a judgment 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 non bankruptcy 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 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.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).			

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**B1 (Official Form 1) (4/10)**

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

Name of Debtor(s):  
**Frank R. DePaola DDS Associates, LLC**

**Signatures**

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

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

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

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

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

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

\_\_\_\_\_  
Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

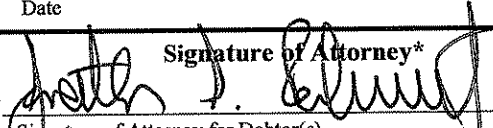
- I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.
- Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X \_\_\_\_\_  
(Signature of Foreign Representative)

\_\_\_\_\_  
(Printed Name of Foreign Representative)

\_\_\_\_\_  
(Date)

**Signature of Attorney\***

X  \_\_\_\_\_  
(Signature of Attorney for Debtor(s))

**JONATHAN L. RABINOWITZ JR9356**  
Printed Name of Attorney for Debtor(s)

**Rabinowitz, Lubetkin & Tully, L.L.C.**  
Firm Name

**293 Eisenhower Parkway, Suite 100**  
Address

**Livingston, NJ 07039**

**973-597-9100**  
Telephone Number

**August 1, 2011**  
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.

X **/s/ Frank R. DePaola, Jr.**  
Signature of Authorized Individual

**FRANK R. DEPAOLA, JR.**  
Printed Name of Authorized Individual

**Sole Member**

Title of Authorized Individual

**August 1, 2011**  
Date

**Signature of Non-Attorney 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 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before 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  
 District of New Jersey**

In re Frank R. DePaola DDS Associates, LLC,  
 Debtor

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 and Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Nobel Biocare UCA, LLC 22715 Savi Ranch Yorba Linda, CA 92887				1,838.00
Smart Cleaners 1200 Washington Street Hoboken, NJ 07030				1,906.20
Community Bank & Trust PO Box 480 Clarks Summit, PA 18411				2,156.60

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(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Quick Change Interiors 1025 Maxwell Lane Suite 1203 Hoboken, NJ 07030				2,486.98
SomnoMed, Inc. 3537 Teasley Lane Denton, TX 76210				3,368.65
Citibank Business PO Box 183051 Columbus, OH 43218				3,650.15
Integrated Systems 65 Wesley Chapel Road Suffern, NY 10901				4,192.98
Doral Dental Lab, Inc. 7210 Red Road Suite 201-223 Miami, FL 33143				4,265.00
Capital One PO Box 71083 Charlotte, NC 28272				5,323.62
Trinity 475 Sansome Street Floor 19 San Francisco, CA 94111				5,655.24
PNC Visa PO Box 856177 Louisville, KY 40285-6177				7,182.79

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Chase Business Card Cardmember Seervices PO Box 15153 Wilmington, DE 19886				9,115.49
Myotronics, Inc. 5870 South 19th Street Kent, WA 98032				9,945.53
Align Technologies, Inc. PO Box 60000 San Francisco, CA 94160				10,893.00
Machine Shop Associates, L.P. 50 Washington Street Hoboken, NJ 07030				12,088.56
PT Maxwell, LLC c/o Toll Brothers City Living 1125 Hudson Street Hoboken, NJ 07030				15,882.22
Williams Dental Laboratory 7510 Arroyo Circle Gilroy, CA 95020				18,756.28
Clarion PO Box 790448 St. Louis, MO 63179-0448				22,389.60
American Express Platinum PO Box 1270 Newark, NJ 07101				30,731.37

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(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>

Henry Schein, Inc.  
41 Weaver Road  
Denver, PA 17517

31,581.72

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, [the president or other officer or an authorized agent of the corporation] named as debtor in this case, declare under penalty of perjury that I have read the foregoing LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS and that it is true and correct to the best of my information and belief.

Date August 1, 2011

Signature /s/ Frank R. DePaola, Jr.  
FRANK R. DEPAOLA, JR.,  
Sole Member

360 Imaging  
One Concourse Parkway  
Suite 645  
Atlanta, GA 30328

Align Tachnologies, Inc.  
PO Box 60000  
San Francisco, CA 94160

Allesee Orthodontic Appliances, Inc.  
13931 Spring Street  
PO Box 725  
Sturtevant, WI 53177

American Express  
PO Box 1270  
Newark, NJ 07101

American Express Platinum  
PO Box 1270  
Newark, NJ 07101

Ansell Zaro Grimm & Aaron, P.C.  
Attn.: David B. Zolotorofe, Esq.  
341 Broad Street  
Clifton, NJ 07013

Appliance Therapy Group  
PO Box 4184  
Van Nuys, CA 91409-4184

Bank of West Trinity Division  
475 Sansome Street, 19th Floor  
San Francisco, CA 94111-3112

Benco 009  
Benco Dental  
295 Centerpoint Boulevard  
PO Box 491  
Pittston, PA 18640-0491



Benco 542  
Benco Dental  
PO Box 952148  
Dallas, TX 75395-2148

Benco Equipment 543  
c/o Benco Dental Co.  
PO Box 952148  
Dallas, TX 75395-2148

Brasseler USA  
One Brasseler Boulevard  
Savannah, GA 31419

Brisk Air Inc.  
1575 John Street  
Fort Lee, NJ 07024

Cablevision  
PO Box 371378  
Pittsburgh, PA 15250

Cablevision  
PO Box 371378  
Pittsburgh, PA 15250-7378

Capital One  
PO Box 71083  
Charlotte, NC 28272

Capital One  
PO Box 71083  
Charlotte, NC 28272

Chase Business  
PO Box 15153  
Wilmington, DE 19886

Chase Business Card  
Cardmember Seervices  
PO Box 15153  
Wilmington, DE 19886

Citibank Business  
PO Box 183051  
Columbus, OH 43218

Citibank Business  
PO Box 183051  
Columbus, OH 43218

Clarion  
PO Box 790448  
St. Louis, MO 63179-0448

Community Bank & Trust  
PO Box 480  
Clarks Summit, PA 18411

Deer Park  
PO Box 856192  
Louisville, KY 40285-6192

Discus Dental, Inc.  
PO Box 1468  
Culver City, CA 90232-1468

Domain Registry of America  
2316 Delaware Avenue  
#266  
Buffalo, NY 14216-2687

Doral Dental Lab, Inc.  
7210 Red Road  
Suite 201-223  
Miami, FL 33143

Employee Benefit Systems, Inc.  
PO Box 160  
Analomink, PA 18320-0160

Five Star Orthodontic Laboratory  
& Supply  
PO Box 888  
Denton, TX 76202-0888

Florida Probe Corporation  
3700 NW 91st Street  
C-100  
Gainesville, FL 32606

Henry Schein, Inc.  
41 Weaver Road  
Denver, PA 17517

Horizon BCBSNJ  
PO Box 1738  
Newark, NJ 07101-1738

IC Care, Inc.  
1750 W Cameron Avenue  
Suite 106  
West Covina, CA 91790

Implant Solutions  
1000 Corporate Drive  
PO Box 770  
Marshfield, WI 54449

IMTEC  
a 3M Company  
2401 North Commerce  
Ardmore, OK 73401

Innovation Dental, Inc.  
127 Newark Avenue  
Jersey City, NJ 07302

Integrated Systems  
65 Wesley Chapel Road  
Suffern, NY 10901

Internal Revenue Service  
ATTN: Special Procedures  
PO Box 744  
Springfield, NJ 07081-0744

IRS  
Chief Counsel's Office  
One Newark Center, Ste. 1500  
Newark, NJ 07102

Kite and Key Electric  
105 Grove Street  
Suite 11  
Montclair, NJ 07042

Machine Shop Associates, L.P.  
50 Washington Street  
Hoboken, NJ 07030

Marine Plumbing, Heating,  
Cooling & Electric  
430 Bloy Street  
Hillside, NJ 07205

Millenium Dental Laboratory, Inc.  
PO Box 55303  
Anoka, MN 55303

Myotronics, Inc.  
5870 South 19th Street  
Kent, WA 98032

NJDA  
PO Box 95000-1325  
Philadelphia, PA 19195-1325

Nobel Biocare UCA, LLC  
22715 Savi Ranch  
Yorba Linda, CA 92887

Orchard Hill Special Waste Mgt.  
187 Route 94  
Lafayette, NJ 07848-9516

Ortho Organizers, Inc.  
1822 Aston Avenue  
Carlsbad, CA 92008-7306

PNC Bank, NA  
249 Fifth Avenue  
Mail Stop P1-POPP-LB-7  
Pittsburgh, PA 15222

PNC Visa  
PO Box 856177  
Louisville, KY 40285-6177

PNC Visa  
PO Box 856177  
Louisville, KY 40285-6177

Proctor & Gamble Oral Health  
24808 Network Place  
Chicago, IL 60673-1248

Profita & Associates, LLC  
106 Grand Avenue  
Suite 480  
Englewood, NJ 07631

Prohealth Capital  
PO Box 41602  
Philadelphia, PA 19101-1602

PSE&G  
20 Commerce Drive, 4th Floor  
Cranford, NJ 07016

PSE&G  
Attn.: Suzanne M. Klar, Esq.  
Law Office of William E. Frese  
PO Box 570  
Newark, NJ 07102

PT Maxwell, LLC  
c/o Toll Brothers City Living  
1125 Hudson Street  
Hoboken, NJ 07030

Purchase Power  
PO Box 371874  
Pittsburgh, PA 15250-7874

Quick Change Interiors  
1025 Maxwell Lane  
Suite 1203  
Hoboken, NJ 07030

Reisinger Oxygen Service, Inc.  
113 Harrison Avenue  
Roseland, NJ 07068-1218

Smart Cleaners  
1200 Washington Street  
Hoboken, NJ 07030

Solution 32 Technology  
Advisory Services  
78 Reservoir Avenue  
Suite 2  
Jersey City, NJ 07307

SomnoMed, Inc.  
3537 Teasley Lane  
Denton, TX 76210

Space Maintainers  
2840 Clark Avenue  
PO Box 7212  
St. Louis, MO 63177-1212

Spotless  
1620 Manhattan Avenue  
Spt. B1  
Union City, NJ 07087

State of New Jersey  
Division of Revenue  
PO Box 417  
Trenton, NJ 08646-0417

State of New Jersey  
Division of Taxation  
50 Barrach Street  
PO Box 269  
Trenton, NJ 08625

The Applied Companies  
5 Marine View Plaza, Suite 500  
Hoboken NJ 0703

Toll Brothers, Inc.  
Attn.: Doug C. Yearly, Jr.,  
Mark Kessler, Esq., James M. Steuterman  
250 Gibraltar Road  
Horsham, PA 19044

Trinity  
475 Sansome Street  
Floor 19  
San Francisco, CA 94111

Ultradent Products, Inc.  
ATTN: Accounts Receivable  
PO Box 410804  
SLC, UT 84141-0804

University Service  
10551 Decatur Road  
Suite 200  
Philadelphia, PA 19154

W.B. Mason Co., Inc.  
PO Box 55840  
Boston, MA 02205-5840

Williams Dental Laboratory  
7510 Arroyo Circle  
Gilroy, CA 95020

B203  
12/94

# United States Bankruptcy Court District of New Jersey

In re Frank R. DePaola DDS Associates, LLC

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

Chapter 11

Debtor(s)

### 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>31,029.00</u>
Prior to the filing of this statement I have received .....	\$ <u>31,029.00</u>
Balance Due .....	\$ <u>0.00</u>

2. The source of 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 a other 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:

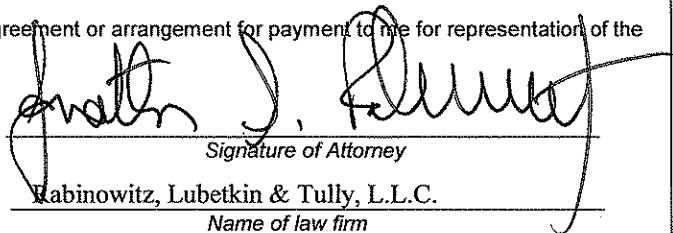
Specifically excluded from the flat fee arrangement which is the subject of the retainer is representation of the Debtor in any adversary proceedings, any motion practice, or any other services other than the preparation of the Voluntary Petition and Schedules and Statement of Financial Affairs and attendance at the meeting of creditors.

#### 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 the bankruptcy proceeding.

August 1, 2011

Date

  
 \_\_\_\_\_  
 Signature of Attorney  
 Rabinowitz, Lubetkin & Tully, L.L.C.  
 \_\_\_\_\_  
 Name of law firm



**CONSENT OF THE SOLE  
MEMBER OF FRANK R. DePAOLA DDS ASSOCIATES, LLC**

Francis R. DePaola, Jr., as Sole Member of Frank R. DePaola DDS Associates, LLC, a limited liability company of the State of New Jersey (the "LLC"), hereby consents to the LLC adopting the following resolutions:

**RESOLVED**, that the Sole and Managing Member of the aforementioned LLC, in view of its financial condition, be and hereby is authorized and directed on behalf of the LLC, to file a petition pursuant to Chapter 11 of the Bankruptcy Code and retain the services of counsel for the purposes of preparing, filing, and prosecuting a Petition under Chapter 11 and to take all steps necessary and related thereto, and that Francis R. DePaola, Jr. is hereby authorized to execute the Petition and any other pleadings or documents he deems necessary in connection with the Chapter 11 case of the LLC; and it is further

**RESOLVED**, that the Sole and Managing Member of the LLC be, and hereby is, authorized and directed in the name and on behalf of the LLC, to prepare, execute, issue, deliver and/or file any and all such further agreements, certificates, instruments, letters and pleadings and other documents to perform any and all such acts as he may deem necessary or desirable to effectuate fully the foregoing Resolution.

In certification hereof, we do set my hand and seal this \_\_\_ day of August, 2011.

FRANK R. DePAOLA DDS ASSOCIATES, LLC

By:           /s/ Frank R. DePaola, Jr.            
Francis R. DePaola, Jr.  
Sole and Managing Member