(Official Form 1) (10/05) Un	ited States Bankruptcy C Southern District of Texas		Voluntary Petition
Name of Debtor (if individual, enter La Juarez, Felipe	st, First, Middle):	Name of Joint Debtor (Spouse) (Last, First Juarez, Cynthia Annette	t, Middle):
All Other Names used by the Debtor in (include married, maiden, and trade nam DBA Felipe Juarez D.M.D.		All Other Names used by the Joint Debtor (include married, maiden, and trade names	
Last four digits of Soc. Sec./Complete E xxx-xx-9950	EIN or other Tax ID No. (if more than one, state a	Last four digits of Soc. Sec./Complete EIN xxx-xx-8356	V or other Tax ID No. (if more than one, state all):
Street Address of Debtor (No. & Street, 829 Cardinal Lane Corpus Christi, TX	ZIP Code 78410	Street Address of Joint Debtor (No. & Street 829 Cardinal Lane Corpus Christi, TX	ZIP Code 78410
County of Residence or of the Principal Nueces	Place of Business:	County of Residence or of the Principal Pl	lace of Business:
Mailing Address of Debtor (if different	rom street address):	Mailing Address of Joint Debtor (if different	ent from street address):
	ZIP Code	_	ZIP Code
Location of Principal Assets of Business (if different from street address above):	S Debtor 3151 McKenzie Road Corpus Christi, Texa		
Type of Debtor (Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and provide the information requested below.) State type of entity:	(Check all applicable boxes.) Health Care Business	☐ Chapter 9 ☐ Chapter 12 ☐ Chapter 13 Nature of Debts (Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding (Check one box)
P. 10	under 26 U.S.C. § 501(c)(3)	☐ Consumer/Non-Business	Business
■ Full Filing Fee attached □ Filing Fee to be paid in installments attach signed application for the cou is unable to pay fee except in install. □ Filing Fee waiver requested (Application)	(Applicable to individuals only) Must rt's consideration certifying that the debtor ments. Rule 1006(b). See Official Form 3A. able to chapter 7 individuals only). Must rt's consideration. See Official Form 3B.	Chapter 11 Check one box: Debtor is a small business debtor as debtor as debtor is not a small business debtor as Check if: Debtor's aggregate noncontingent liquior affiliates are less than \$2 million.	efined in 11 U.S.C. § 101(51D). as defined in 11 U.S.C. § 101(51D).
<u> </u>	available for distribution to unsecured credingly available for distribution available for the contract of the contr		THIS SPACE IS FOR COURT USE ONLY
49 99 199		25,001- 50,001- OVER 50,000 100,000 100,000	
Estimated Assets \$0 to \$50,001 to \$100,00 \$50,000 \$100,000 \$500.		0,000,001 to \$50,000,001 to More than \$50 million \$100 million \$100 million	
Estimated Debts \$0 to \$50,001 to \$100,0 \$50,000 \$100,000 \$500.	,000 \$1 million \$10 million \$	0,000,001 to \$50,000,001 to More than \$50 million \$100 million \$100 million	

(Official Form 1) (10/05) FORM B1, Page 2 Name of Debtor(s): **Voluntary Petition** Juarez, Felipe Juarez, Cynthia Annette (This page must be completed and filed in every case) Prior Bankruptcy Case Filed Within Last 8 Years (If more than one, attach additional sheet) Case Number: Date Filed: Location Where Filed: Southern District of Texas, Nueces County 04-21602-C-7 11/26/04 Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Date Filed: Case Number: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission 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 pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. and is requesting relief under chapter 11.) I further certify that I delivered to the debtor the notice required by §342(b) of the Bankruptcy Code. ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) Date Exhibit C **Certification Concerning Debt Counseling** by Individual/Joint Debtor(s) 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 I/we have received approved budget and credit counseling during health or safety? the 180-day period preceding the filing of this petition. ☐ I/we request a waiver of the requirement to obtain budget and ☐ Yes, and Exhibit C is attached and made a part of this petition. credit counseling prior to filing based on exigent circumstances. No (Must attach certification describing.) **Information Regarding the Debtor (Check the Applicable Boxes)** Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Statement by a Debtor Who Resides as a Tenant of Residential Property Check all applicable boxes. Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

(Official Form 1) (10/05) FORM B1, Page 3

Voluntary Petition

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

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 \$342(b) of the Bankruptcy Code.

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

X /s/ Felipe Juarez

Signature of Debtor Felipe Juarez

X /s/ Cynthia Annette Juarez

Signature of Joint Debtor Cynthia Annette Juarez

Telephone Number (If not represented by attorney)

July 14, 2006

Date

Signature of Attorney

X /s/ Deborah J. Green

Signature of Attorney for Debtor(s)

Deborah J. Greer 16550400

Printed Name of Attorney for Debtor(s)

Deborah J. Greer Attorney at Law

Firm Name

American Bank Plaza, Suite 424 711 N. Carancahua Corpus Christi, TX 78475

Address

Email: djgreer@greerlaw.net

361-883-4444 Fax: 361-883-4448

Telephone Number

July 14, 2006

Date

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

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

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.)

Name of Debtor(s):

Juarez, Felipe

Juarez, Cynthia Annette

- ☐ 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 §1511 of title 11, United States Code, 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 Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

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

Social Security number (If the bankrutpcy 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

Λ

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.

Form 4 (10/05)

United States Bankruptcy Court Southern District of Texas

	Felipe Juarez		G M	
In re	Cynthia Annette Juarez		Case No.	
		Debtor(s)	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, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
ACS	ACS	student loan		46,019.88
PO Box 7051	PO Box 7051			
Utica, NY 13504-7051	Utica, NY 13504-7051			
Capital One Bank PO Box 30285	Capital One Bank PO Box 30285	credit card debt		4,936.00
Salt Lake City, UT 84130	Salt Lake City, UT 84130			
HESAA	HESAA	student loan		5,823.11
PO Box 548	PO Box 548	Student loan		3,023.11
Trenton, NJ 08625-0548	Trenton, NJ 08625-0548			
Household Credit Services	Household Credit Services	credit card debt		191.00
P.O. Box 80084	P.O. Box 80084			
Salinas, CA 93912-0084	Salinas, CA 93912-0084			
Internal Revenue Service	Internal Revenue Service	1997-2000	Disputed	266,835.81
P.O. Box 21126	P.O. Box 21126	1040 Taxes		
Philadelphia, PA 19114	Philadelphia, PA 19114	unsecured		
		discharged disputed		
Internal Revenue Service	Internal Revenue Service	•		149,510.00
P.O. Box 21126	P.O. Box 21126			
Philadelphia, PA 19114	Philadelphia, PA 19114			
Medical Capital	Medical Capital	medical		12,726.00
4321 Goshen Road	4321 Goshen Road	equipment-		
Fort Wayne, IN 46818-1242	Fort Wayne, IN 46818-1242	business debt		
Sallie Mae	Sallie Mae	student loan		160,000.00
PO Box 9500	PO Box 9500			
Wilkes Barre, PA 18773-9500	Wilkes Barre, PA 18773-9500			

Felipe Juarez In re Cynthia Annette Jua	rez	Case	No.	
	Debtor(s)			
LIST	OF CREDITORS HOLDING 20 L. (Continuation		URED CLAIMS	1
(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
	DECLARATION UNDER PE ON BEHALF OF A CORPORAT			

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

Date	July 14, 2006	Signature	/s/ Felipe Juarez
			Felipe Juarez
			Debtor
Date	July 14, 2006	Signature	/s/ Cynthia Annette Juarez
		-	Cynthia Annette Juarez
			Joint 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 Southern District of Texas

In re	Felipe Juarez,		Case No.	
	Cynthia Annette Juarez			
_		Debtors	Chapter	11

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

			AM	OUNTS SCHEDULED	
NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	111,000.00		
B - Personal Property	Yes	6	57,880.24		
C - Property Claimed as Exempt	Yes	4			
D - Creditors Holding Secured Claims	Yes	1		54,400.00	
E - Creditors Holding Unsecured Priority Claims	Yes	2		149,510.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		496,531.80	
G - Executory Contracts and Unexpired Leases	Yes	2			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	5			27,627.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			24,007.09
Total Number of Sheets of ALL S	Schedules	27			
	Т	otal Assets	168,880.24		
			Total Liabilities	700,441.80	

United States Bankruptcy CourtSouthern District of Texas

In re	Felipe Juarez,		Case No	
	Cynthia Annette Juarez			
		Debtors	Chapter	11

STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159) [Individual Debtors Only]

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	149,510.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	0.00
Student Loan Obligations (from Schedule F)	211,842.99
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	361,352.99

The foregoing information is for statistical purposes only under 28 U.S.C § 159.

Corpus Christi, TX 78410

In re	Felipe Juarez,	Case No.
_	Cynthia Annette Juarez	,

Debtors

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 husband, wife, or both 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 Nature of Debtor's Wife, Joint, or Community Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption Amount of Secured Claim	home: 829 Cardinal Lane	Fee simple	С	111,000.00	54,400.00
	Description and Location of Property		Wife, Joint, or	Debtor's Interest in Property, without Deducting any Secured	

Sub-Total > 111,000.00 (Total of this page)

Total > **111,000.00**

(Report also on Summary of Schedules)

In re	Felipe Juarez,	Case No.
<u></u>	Cynthia Annette Juarez	,

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 husband, wife, or both 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." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

	-				
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Х			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and		1st National Bank 3306 McKenzie Corpus Christi, Texas 78410	С	73.00
	homestead associations, or credit unions, brokerage houses, or cooperatives.		USAA Federal Savings 10750 McDermott Freeway San Antonio, TX 78284-8499	С	158.99
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			

Sub-Total >	231.99
(Total of this page)	

In re	Felipe Juarez,	

Case No.

Cynthia Annette Juarez

Debtors

SCHEDULE B. PERSONAL PROPERTY (Continuation Sheet)

		(11 1 11 11 11 11 11 11 11 11 11 11 11 1		
	Type of Property N N E	Description and Location of Prope	Joint, or	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
4.	Household goods and furnishings, including audio, video, and computer equipment.	Living Room: rug-0 2 sofas-50 3 chairs-35 set drapes-5 3 lamps-10 3 coffee table-90 clock-1 mirror-2 5 pictures-10 T.V300 video equipment-5 Dining Room: dining room set-300 drapes-5 3 table clothes-10 plain wall mirror-5 Kitchen: refrigerator-200 stove-200 dishwasher-50 microwave-100 dishes-3 flatware-1 10 pots/pans-25 glassware-8 blender-5 coffee pot-5 juicer-5 crockpot-5 handmixer-2 food processor-5 toaster-2	C	2,874.00
		Den/Office: 2 rugs-20 2 sofa-40 chairs-20 lamps-5 drapes-5 old computer monitor,printer,tower-50 1 TV-0 100 tapes-25 desk, adding machine-20 coffee table-5 3 wall pictures-15 25 various kinds angels-30		
She to th	et <u>1</u> of <u>4</u> continuation sheets attac ne Schedule of Personal Property	Bathrooms: 2 shower curtains-4 2 mirrors-5 scale-2 30 towels-10 12 sets-36	Sub-Tot (Total of this page)	al > 2,874.00

In re	Felipe Juarez,
	Cynthia Annette Juarez

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		Garage/Basement washer-100 dryer-100 clothes iron-2 6 luggage-25 drill, saw, compressor-50 lawnmower-70 3 shelving-6 7 plastic chairs-14 3 benches-30 2 plastic picnic tables-20	С	417.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	75 garage sale paperbacks	С	38.00
6.	Wearing apparel.	man's/woman's clothing	С	642.00
7.	Furs and jewelry.	4 watches-15 3 rings-15 2 necklaces-50 4 earrings-25 tie-tacks-5	С	110.00
8.	Firearms and sports, photographic, and other hobby equipment.	fabric-25 sewing machine-25 tent-25 3 poles-5 4 bicycles-80 manual treader-30 sports equipment-30 Nortik Track-25 weights-10	С	255.00
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.	Х		
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	X		
		(T	Sub-Tota of this page)	al > 1,462.00

Sheet <u>2</u> of <u>4</u> continuation sheets attached to the Schedule of Personal Property

In re	Felipe Juarez,
	Cynthia Annette Juarez

Case No.

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	10	6AA Federal Savings 750 McDermott Freeway n Antonio, TX 78284-8499	С	4,229.73
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	Мс	onies Due for Services Rendered	С	20,557.52
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owing 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 A - Real Property.	X			
20.	Contingent and noncontingent 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			
				Sub-Tota	al > 24,787.25
			(T	otal of this page)	

Sheet <u>3</u> of <u>4</u> continuation sheets attached to the Schedule of Personal Property

In re	Felipe Juarez,
	Cynthia Annette Juarez

Case No.

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.		Patient list for dental services provided attached	С	0.00
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2001 Ford Windstar Location: 829 Cardinal Lane, Corpus Christi TX	С	7,325.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.		Location: 3151 McKenzie Rd, Corpus Christi, Tx	С	3,000.00
	supplies.		2 sofas, 2 chairs, end table, 2 desks, 5 file cabinets, 6 bookshelves, comptuer, lunch table, TV		
29.	Machinery, fixtures, equipment, and supplies used in business.		Location: 3151 McKinzie Road, Corpus Christi, Tx	С	17,200.00
	supplies used in ousliess.		dental equipment & machinery: 3 dental chairs 3 x-ray units, x-ray processor 3 operating chairs 3 assistant chairs 1 actoclave 1 panoramic xray machine		
30.	Inventory.		Dental Supply Inventory	С	500.00
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.		student piano	С	500.00

Sub-Total > 28,525.00 (Total of this page)

Total > **57,880.24**

Sheet <u>4</u> of <u>4</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Orthodontic Contracts - Services not yet rendered

Account Number	Patient Name	Account Balance
196600	and the second s	477.26
470900		2783.5
383800		2615.5
475500		2850
447500		733.38
383800		2398.5
448000		957.48
373800		1658.81
409600		1177
40600		703.8
234000		581.98
234000		1217.46
234000		1208.81
236900		2029.13
125000		2800 ~
472300		3230 -
471700		3710 ~
449200		711.63
188700		1059.98
309200		1102.52

TOTAL: 34006.74

In re	Felipe Juarez,		Case No.	
	Cynthia Annette Juarez			
		Debtors		
	SCHEDUL	LE C. PROPERTY CLAIMED AS I	EXEMPT	
(Check o	elects the exemptions to which debtor is entone box) J.S.C. §522(b)(2) J.S.C. §522(b)(3)	titled under: Check if debtor cl \$125,000.	aims a homestead e:	xemption that exceeds
	Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
	<u>perty</u> linal Lane Christi, TX 78410	Tex. Const. art. XVI, §§ 50, 51, Tex. Prop. Code §§ 41.001002	56,600.00	0 111,000.00

_		
In	 r	0

Felipe Juarez, **Cynthia Annette Juarez**

Debtors

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)			
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Household Goods and Furnishings Living Room: rug-0 2 sofas-50 3 chairs-35 set drapes-5 3 lamps-10 3 coffee table-90 clock-1 mirror-2 5 pictures-10 T.V300	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(1)	2,874.00	2,874.00

Kitchen:

drapes-5

refrigerator-200

video equipment-5

3 table clothes-10 plain wall mirror-5

Dining Room: dining room set-300

stove-200

dishwasher-50

microwave-100

dishes-3

flatware-1

10 pots/pans-25

glassware-8

blender-5

coffee pot-5

juicer-5

crockpot-5

handmixer-2

food processor-5

toaster-2

Den/Office:

2 rugs-20

2 sofa-40 chairs-20

lamps-5

drapes-5

old computer monitor, printer, tower-50

1 TV-0

100 tapes-25

desk, adding machine-20

coffee table-5

3 wall pictures-15

25 various kinds angels-30

Bathrooms:

2 shower curtains-4

2 mirrors-5

scale-2

30 towels-10

12 sets-36

3 bath mats-16

2 clothes hampers-4 2 blowdryers-6

curling iron-2 Copyright (c) 1996-2005 - Best Case Solutions, Inc. - Evanston, IL - (800) 492-8037 straightening iron-5

_ continuation sheets attached to the Schedule of Property Claimed as Exempt

In re	Felipe Juarez,
	Countle in Ammette

Cynthia Annette Juarez

Debtors

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT (Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Garage/Basement washer-100 dryer-100 clothes iron-2 6 luggage-25 drill, saw, compressor-50 lawnmower-70 3 shelving-6 7 plastic chairs-14 3 benches-30 2 plastic picnic tables-20	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(1)	417.00	417.00
Books, Pictures and Other Art Objects; Collectible 75 garage sale paperbacks	<u>s</u> Tex. Prop. Code § 43.001	38.00	38.00
Wearing Apparel man's/woman's clothing	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(5)	642.00	642.00
Furs and Jewelry 4 watches-15 3 rings-15 2 necklaces-50 4 earrings-25 tie-tacks-5	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(6)	110.00	110.00
Firearms and Sports, Photographic and Other Hob fabric-25 sewing machine-25 tent-25 3 poles-5 4 bicycles-80 manual treader-30 sports equipment-30 Nortik Track-25 weights-10	<u>by Equipment</u> Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(8)	255.00	255.00
Interests in IRA, ERISA, Keogh, or Other Pension of USAA Federal Savings 10750 McDermott Freeway San Antonio, TX 78284-8499	or Profit Sharing Plans Tex. Prop. Code § 42.0021	4,229.73	4,229.73
Automobiles, Trucks, Trailers, and Other Vehicles 2001 Ford Windstar Location: 829 Cardinal Lane, Corpus Christi TX	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(9)	7,325.00	7,325.00
Office Equipment, Furnishings and Supplies Location: 3151 McKenzie Rd, Corpus Christi, Tx 2 sofas, 2 chairs, end table, 2 desks, 5 file cabinets, 6 bookshelves, comptuer, lunch table, TV	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(4)	3,000.00	3,000.00

In re	Felipe Juarez,
	Cynthia Annette Juarez

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT (Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Machinery, Fixtures, Equipment and Supplies User Location: 3151 McKinzie Road, Corpus Christi, Tx	d in Business Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(4)	17,200.00	17,200.00
dental equipment & machinery: 3 dental chairs 3 x-ray units, x-ray processor 3 operating chairs 3 assistant chairs 1 actoclave 1 panoramic xray machine			
Inventory Dental Supply Inventory	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(4)	500.00	500.00
Other Personal Property of Any Kind Not Already student piano	<u>Listed</u> Tex. Const. art. XVI, §49; Tex. Prop. Code §§ 42.001(a), (d), 42.002	500.00	500.00

In re	Felipe Juarez,
	Cynthia Annette Juarez

Case No.

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 a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C§112; 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 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 all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no cleditors	, 110	ıuıı	ig secured claims to report on this schedule D.					
CDEDWOODIG NAME	C	Hu	sband, Wife, Joint, or Community	CO	UN	D	AMOUNT OF	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN N L S P I Q U N U T G I E E D D				CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxx7859			08/95	Т	E			
Home Equity P.O. Box 13716 Sacramento, CA 95853-3716		С	Mortgage home: 829 Cardinal Lane Corpus Christi, TX 78410 Value \$ 111,000.00		D		54,400.00	0.00
Account No.	t					\Box	,	
			Value \$					
Account No.								
			Value \$					
Account No.	1							
			Value \$					
continuation sheets attached			S (Total of tl	ubt nis j			54,400.00	
	Total 54,400.00 (Report on Summary of Schedules)							

In re	Felipe Juarez,	Case No.
III IC	Cynthia Annette Juarez	Cuse 110.
		Debtors
	SCHEDULE E. CREDITORS HOLD	ING UNSECURED PRIORITY CLAIMS
unse includebte the days entity	ecured claims entitled to priority should be listed in this schedule. Using zip code, and last four digits of the account number, if any, tor, as of the date of the filing of the petition. Use a separate continuation of the complete account number of any account the debtor has with debtor chooses to do so. If a minor child is a creditor, indicate that J.S.C.§112; Fed.R.Bankr.P. 1007(m). If any entity other than a spouse in a joint case may be jointly liately on the appropriate schedule of creditors, and complete Schedule.	type of priority, is to be set forth on the sheets provided. Only holders of In the boxes provided on the attached sheets, state the name, mailing address, of all entities holding priority claims against the debtor or the property of the nuation sheet for each type of priority and label each with the type of priority. In the creditor is useful to the trustee and the creditor and may be provided if it by stating "a minor child" and do not disclose the child's name. See ble on a claim, place an "X" in the column labeled "Codebtor", include the eth-Codebtors. If a joint petition is filed, state whether husband, wife, both of g an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or
Com label	nmunity". If the claim is contingent, place an "X" in the column la led "Unliquidated". If the claim is disputed, place an "X" in the co	beled "Contingent". If the claim is unliquidated, place an "X" in the column blumn labeled "Disputed". (You may need to place an "X" in more than one
	nese three columns.) Report the total of claims listed on each sheet in the box labeled edule E in the box labeled "Total" on the last sheet of the complet	"Subtotal" on each sheet. Report the total of all claims listed on this ed schedule. Report this total also on the Summary of Schedules.
amo		et in the box labeled "Subtotal" on each sheet. Report the total of all d "Total" on the last sheet of the completed schedule. If applicable, also
	Check this box if debtor has no creditors holding unsecured priorit	y claims to report on this Schedule E.
TYP	PES OF PRIORITY CLAIMS (Check the appropriate box(es) be	elow if claims in that category are listed on the attached sheets.)
or re	Domestic support obligations Claims for domestic support that are owed to or recoverable by a sesponsible relative of such a child, or a governmental unit to whor J.S.C. § 507(a)(1).	pouse, former spouse, or child of the debtor, or the parent, legal guardian, in such a domestic support claim has been assigned to the extent provided in
_ c	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or fire appointment of a trustee or the order for relief. 11 U.S.C. § 507	nancial affairs after the commencement of the case but before the earlier (a)(3).
v inde	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, spendent sales representatives up to \$10,000* per person earned waterstation of business, which ever occurred first, to the extent provided the salary salar	and sick leave pay owing to employees and commissions owing to qualifying rithin 180 days immediately preceding the filing of the original petition, or ided in 11 U.S.C. § 507 (a)(4).
N	Contributions to employee benefit plans Money owed to employee benefit plans for services rendered with ation of business, whichever occurred first, to the extent provided	in 180 days immediately preceding the filing of the original petition, or the in 11 U.S.C. § 507(a)(5).
_	C ertain farmers and fishermen Claims of certain farmers and fishermen, up to \$4,925* per farmer	or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
C	Deposits by individuals Claims of individuals up to \$2,225* for deposits for the purchase, that were not delivered or provided. 11 U.S.C. § 507(a)(7).	lease, or rental of property or services for personal, family, or household
	Γaxes and certain other debts owed to governmental units Γaxes, customs duties, and penalties owing to federal, state, and lo	ocal governmental units as set forth in 11 U.S.C § 507(a)(8).
C		institution Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using

 \square Claims for death or personal injury while debtor was intoxicated

alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

In re	Felipe Juarez,
	Cynthia Annette Juare

~			
Case No.			

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR DISPUTED Husband, Wife, Joint, or Community UNLIQUIDATED CREDITOR'S NAME, ONTINGENT **AMOUNT** AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** J C ENTITLED TO INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM **PRIORITY** AND ACCOUNT NUMBER (See instructions.) Account No. xxx-xx-9950 Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114 С 149,510.00 149,510.00 Account No. Account No. Account No. Account No. Subtotal Sheet <u>1</u> of <u>1</u> continuation sheets attached to 149,510.00 149,510.00 (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 149,510.00 149,510.00

(Report on Summary of Schedules)

In re	Felipe Juarez, Cynthia Annette Juarez		Case No.	
-		Debtors	••	

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, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C.§112; 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 husband, wife, both of them, or the marital community maybe 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 all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

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

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT LZG	HYD-CD-LZC	SPUTE	AMOUNT OF CLAIM
Account No. xxx-xx-x950-1			08/86	Ť	T E D		
ACS PO Box 7051 Utica, NY 13504-7051		С	student loan		D		46,019.88
Account No.			Notice Only	Г	Г		
Barbara C. Jue, Attorney Advisor Office of the U.S. Trustee 606 North Carancahua, Suite 1107 Corpus Christi, TX 78476		С					0.00
Account No. xxxx-xxxx-1567			credit card debt	\vdash	H		
Capital One Bank PO Box 30285 Salt Lake City, UT 84130		С					
							4,936.00
Account No. HESAA PO Box 548 Trenton, NJ 08625-0548		С	08/86 student loan				5,823.11
				Subt	∟ tota	∟ l	
2 continuation sheets attached			(Total of t				56,778.99

In re	Felipe Juarez,	Case No.
	Cynthia Annette Juarez	

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	_	_			_	_	_	_	
CREDITOR'S NAME,	υC	Hu	sband, Wife, Joint, or Community		Ç	Ų	ļ	ÞΤ	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	H & Y C	DATE CLAIM WAS INCURRED AN CONSIDERATION FOR CLAIM. IF CLAIS SUBJECT TO SETOFF, SO STATI	AIM	CONFINGENT	UNLIQUIDAT	F U T E	J	AMOUNT OF CLAIM
Account No. xxxx-xxxx-xxxx-5751			2006		T	E D			
Household Credit Services P.O. Box 80084 Salinas, CA 93912-0084		С	credit card debt			D			191.00
Account No.			1997-2000				Γ		
Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114		С	1040 Taxes unsecured discharged disputed				,	x	
									266,835.81
Account No.		П	Notice Only		T		T	1	
Internal Revenue Service STOP #5026AUS 300 E. 8th Street Austin, TX 78701		С							0.00
Account No. xxxx-2459			medical equipment-business debt				T	1	
Medical Capital 4321 Goshen Road Fort Wayne, IN 46818-1242		С							12,726.00
Account No. xxx-xx-9950		H	09/94		H	\vdash	t	+	
Sallie Mae PO Box 9500 Wilkes Barre, PA 18773-9500		С	student loan						160,000.00
Sheet no1 of _2 sheets attached to Schedule of				S	ub	tota	ıl	T	A20 752 94
Creditors Holding Unsecured Nonpriority Claims			T)	otal of th	nis	pag	ge)		439,752.81

In re	Felipe Juarez,	Case No.
	Cynthia Annette Juarez	

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) Account No.	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	IΩ	ľ		AMOUNT OF CLAIM
State Comptroller 111 E. 17th Street Austin, TX 78774-0100		С						0.00
Account No. US Trustee 515 Rusk Suite 3516 Houston, TX 77002		С	Notice Only					0.00
Account No.								
Account No.								
Account No.								
Sheet no. _2 of _2 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub this				0.00
			(Report on Summary of So	-	Γota	al	Ī	496,531.80

In re	Felipe Juarez,	Case No.	
	Cynthia Annette Juarez		
_		Debtors ,	

SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Orthodontic Contracts

See attached itemized list of orthodontic contracts (services not yet rendered)

Total \$34006.74

Stonewall Shopping Center, LTD 3151 McKenzie Corpus Christi, TX 78410

Commercial Lease 01/2004 to 01/2009 **Debtor** is tenant

Orthodontic Contracts - Services not yet rendered

Account Number	Patient Name	Account Balance
196600	and the second s	477.26
470900		2783.5
383800		2615.5
475500		2850
447500		733.38
383800		2398.5
448000		957.48
373800		1658.81
409600		1177
40600		703.8
234000		581.98
234000		1217.46
234000		1208.81
236900		2029.13
125000		2800 ~
472300		3230 -
471700		3710 ~
449200		711.63
188700		1059.98
309200		1102.52

TOTAL: 34006.74

Form	B6F
$(10/0)^{4}$	5)

In re	Felipe Juarez,	Case No.	
	Cynthia Annette Juarez		
-		,	

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 debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Felipe Juarez
Cynthia Annette Juarez

Case No.

Debtor(s)

SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12, or 13 case wheth	er
or not a joint natition is filed, unless the snowes are separated and a joint natition is not filed. Do not state the name of any minor child	

Debtor's Marital Status:	DEPENDENTS O	F DEBTOR	AND SP	OUSE	101 01111	<u>. </u>
Beotor s Wartan Status.	RELATIONSHIP:		AGE:			
	daughter		10			
Married	daughter		12			
	daughter		16			
	daughter		20			
Employment:	DEBTOR			SPOUSE		
	entist		manage			
Name of Employer se	elf-employed	Felip J	uarez,	D.M.D.		
	years	14 yea				
	51 McKinzie Road orpus Christi, TX 78410		lcKinzio s Christ	e Road ti, TX 78410		
INCOME: (Estimate of average m		<u> </u>		DEBTOR		SPOUSE
	lary, and commissions (Prorate if not paid month	hlv)	\$	26,287.00	\$	1,340.00
2. Estimate monthly overtime	inity, and commissions (Frome it not paid mone	,	\$ _	0.00	\$ _	0.00
3. SUBTOTAL			\$	26,287.00	\$_	1,340.00
3. SCB10111E						
4. LESS PAYROLL DEDUCTION	NS					
 a. Payroll taxes and social sec 	urity		\$	0.00	\$	0.00
b. Insurance	•		\$	0.00	\$	0.00
c. Union dues			\$	0.00	\$	0.00
d. Other (Specify):			<u> </u>	0.00	· -	0.00
			\$	0.00	\$	0.00
5. SUBTOTAL OF PAYROLL DE	EDUCTIONS		\$	0.00	\$_	0.00
6. TOTAL NET MONTHLY TAK	E HOME PAY		\$_	26,287.00	\$_	1,340.00
7. Regular income from operation of	of business or profession or farm. (Attach detailed	d statement)	\$	0.00	\$	0.00
8. Income from real property			\$	0.00	\$	0.00
9. Interest and dividends			\$	0.00	\$	0.00
10. Alimony, maintenance or suppo	ort payments payable to the debtor for the debt	or's use o	r		_	
that of dependents listed above			\$	0.00	\$	0.00
11. Social security or other government	ment assistance					
(Specify):			\$	0.00	\$	0.00
			\$	0.00	\$	0.00
12. Pension or retirement income			\$	0.00	\$	0.00
13. Other monthly income						
(C:f).			\$	0.00	\$	0.00
			\$	0.00	\$_	0.00
14. SUBTOTAL OF LINES 7 THI	ROUGH 13		\$	0.00	\$_	0.00
15. TOTAL MONTHLY INCOME	E (Add amounts shown on lines 6 and 14)		\$_	26,287.00	\$_	1,340.00
16. TOTAL COMBINED MONTH	HLY INCOME: \$ 27,627	.00	(Rep	ort also on Sum	nmary	of Schedules)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

	Initials	Date
Prepared By		ALEXT COMMON
Approved By	1	

© WILSON JONES G7504 ColumnWrite ® 0.0 TOTAL DEPOSITS PER BANK. 0.00 * 22,717.02 + LESS: 4000 CR 31,391.38 + TO FUB REDEPOSITED 28,696.58 + 27,478.39 + ON 1-17-06 26,501.58 + 24,936.59 + 161,721.54 * + CINDY'S SALARY

Felipe Juarez Schedule of Expenses January 1, 2006 - June 30, 2006

Accounting Fees	<u>\$</u>	3116
Advertising		1756
Bank Credit Card Charges		1669
Business Promotion		139
Contract Labor		933
Dental Supplies		10981
Donations		50
Dues and Subscriptions		491
Insurance:Malpractice Insurance		770
Laboratory Fees		9082
Licenses and Permits		350
Meals & Entertainment		42
Office Supplies		2794
Payroll Expenses		26520
Petty Cash		7
Postage & Delivery		304
Professional Consulting		500
Refunds		810
Rent		11100
Repairs & Maintenance		126
Security		143
Taxes:Payroll		43
Telephone		2154
Uniforms		141
Utilities		2300
Six-month Total		76322
Monthly expenses		12720





	2005 Expense			nded			
Accounting Fees	7,058.88	January	February 2000	March 1116	April	May	June
Advertising	5,019.43	and the second second		7,10		756.04	1000
Automobile Expense	681.54					The street of th	
Bank Charges	500.90	62.66	6 219.78	169.68	286.44	347.44	582.95
Bookkeeping Service	110.00						
Business Promotion	420.76		100	39		384	
Collection Agency	500.00		a transfer of the second				
Contract Labor	**************************************	205	5 63		340	290	35
Credit Card Fees	3,336.36	100	1911				
Dental Supplies	11,884.21	3498.3	3 376.65	2358.43	237.93	2242.91	2267.1
Depreciation							10.00
Donations	175.00					50	
Dues and Subscriptions	694.50			461	29.95		
E-BUSINESS	9.95	10000					
Employee Goodwill	939.02	11.112	THE STATE OF THE S		The second state of the se		A distribution of the
Insurance:Disability Insurance	5,383.62	100000000000000000000000000000000000000			The state of the s		
Insurance:Liability Insurance	783.00				77.77		
Insurance:Life Insurance	2,046.50	1000					
Insurance:Malpractice Insurance	1,031.00		248	261			261
Insurance:SE Health Insurance	2,946.00						
Laboratory Fees	15,510.11	1400	0 1703.94	1958.35	1327.1	1561	1131.64
Licenses and Permits	660.00			25	325		
Meals & Entertainment	414.17	41.68	8				
Medical Books	94.95						
Miscellaneous	1,023.36						
Office Supplies	4,421.39	312.17	7 354.3	353.28	449.04	844.69	480.21
Overpayment	623.10						
Pager Service	109.92						
Payroll Expenses	35,264.74	2792.33	3739.15	3540.68	4646.65	5276.31	6524.5
Petty Cash	875.00			17 d d d d			
Postage & Delivery	673.18		39		63	100.39	10:
Professional Consulting	60.00						500
Refunds	1,008.64				55	516	12:
Rent	20,350.00	1850	0 1850	1850	3700		185

Total disb per bank statement		Personal/unidentified		Other Expenses	Wages:Payroll Adjustment	Wages	Utilities	Uniforms	Uncategorized Payroll	U.S. Trustee	Travel	Telephone	Tech Support	Taxes:TWC	Taxes:Property	Taxes:Payroll	Taxes:Futa	Security	Returned Deposit	Repairs & Maintenance
			280,880.18	279.20			3,588.73	143.35	731.61	1,295.20		4,056.15	1,013.50	148.01	1,316.34	6,195.16	394.95	1,228.66	478.68	2,496.50
22728.9	22842.7	11966.8	10875.9				295.33					332.85				13.81			AND THE RESIDENCE OF THE PARTY	42.77
26373.61	26373.61	15214.77	11158.84				221.97	141.21		A A Common or an annual section of the section of t		91.84								1 TO
26373.61 28482.59 26515.19 28602.39 27010.27	28482.59	15685.78	12796.81				339.36				VIII.	145.05						71.45		33.53
26515.19	26515.19	14266.83	12248.36			The state of the s	352.48		And the second s			356.97				28.8				50
28602.39		15269.41	13332.98				626.62	10 mm				721.58				and the state of t				
27010.27	28602.39 27010.27	11101.64	15908.63	THE STATE OF THE S			464.63					506.15						71.45		
	159826.75	83505.23	76321.52	0	0	0	2300.39	141.21	0	0	0	2154.44	0	0	0	42.61	0	142.9	0	126.3

	Felipe Juarez
In re	Cynthia Annette Juarez

Case No.	

Debtor(s)

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Compexpenditures labeled "Spouse."	olete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	781.00
a. Are real estate taxes included? Yes No _X	· -	
b. Is property insurance included? Yes No _X_		
2. Utilities: a. Electricity and heating fuel	\$	300.00
b. Water and sewer	\$	140.00
c. Telephone	\$	50.00
d. Other cable	\$	52.61
3. Home maintenance (repairs and upkeep)	\$	100.00
4. Food	\$	1,200.00
5. Clothing	\$	600.00
6. Laundry and dry cleaning	\$	100.00
7. Medical and dental expenses	\$	343.00
8. Transportation (not including car payments)	\$	68.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	100.00
10. Charitable contributions	\$	100.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	300.00
b. Life	\$	176.00
c. Health	\$	729.00
d. Auto	\$	274.17
e. Other disability w/ life	\$	406.71
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) Property Tax	\$	290.73
13. Installment payments: (In chapter 11, 12 and 13 cases, do not list payments to be included in the plan.)		
a. Auto	\$	0.00
b. Other See Detailed Expense Attachment	\$	5,025.87
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	12,720.00
17. Other supplemental education	\$	150.00
Other	\$	0.00
18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	\$	24,007.09
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME		
a. Total monthly income from Line 16 of Schedule I	\$	27,627.00
b. Total monthly expenses from Line 18 above	\$	24,007.09
c. Monthly net income (a. minus b.)	\$	3,619.91

Form B6J
(10/05)

In re

Felipe Juarez Cynthia Annette Juarez		Case No.	
	Debtor(s)		

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

Other Installment Payments:

Income Tax & Employment Taxes	<u> </u>	3,113.00
Sallie Mae	\$	1,330.00
ACS	\$	407.87
HESAA	\$	175.00
Total Other Installment Payments	\$	5,025.87

Official Form 6-Decl. (10/05)

United States Bankruptcy Court Southern District of Texas

In re	Felipe Juarez Cynthia Annette Juarez		Case No.	
		Debtor(s)	Chapter	11
	DECLARATION CO	ONCERNING DEBTOR'S	SCHEDULI	ES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______ sheets [total shown on summary page plus 2], and that they are true and correct to the best of my knowledge, information, and belief.

Date	July 14, 2006	Signature	/s/ Felipe Juarez Felipe Juarez Debtor
Date	July 14, 2006	Signature	/s/ Cynthia Annette Juarez Cynthia Annette Juarez Joint 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 Southern District of Texas

	Felipe Juarez			
In re	Cynthia Annette Juarez		Case No.	
		Debtor(s)	Chapter	11

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. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; 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 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 also may 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 corporate 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
\$176,014.00	2006 YTD income from dental practice \$169,476 Wife's Wages \$6538
\$141,127.00	2005 Income from dental practice \$129,914 Wife's wages \$11,213
\$125,492.00	2004 Income from dental practice \$122,879 Wife's wages \$2,613

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

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 if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (*) 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.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (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.)

		AMOUNT	
	DATES OF	PAID OR	
	PAYMENTS/	VALUE OF	AMOUNT STILL
NAME AND ADDRESS OF CREDITOR	TRANSFERS	TRANSFERS	OWING
Home Equity P.O. Box 13716 Sacramento, CA 95853-3716	monthly mortgage \$781.00	\$2,343.00	\$54,400.00
Sallie Mae	04/06 2800.00	\$6,363.00	\$160,000.00
PO Box 9500 Wilkes Barre, PA 18773-9500	06/12 3563.00		
ACS	06/06 175.00	\$525.00	\$46,019.88
PO Box 7051	05/06 175.00		
Utica, NY 13504-7051	04/06 175.00		
HESAA	06/06 408	\$1,224.00	\$5,823.11
PO Box 548	06/06 408		
Trenton, NJ 08625-0548	06/06 408		
Capital One Bank PO Box 30285 Salt Lake City, UT 84130	04/06 - 06/06	\$2,400.00	\$4,936.00
Capital One Bank PO Box 30285 Salt Lake City, UT 84130	04/06 - 06/06	\$430.00	\$0.00
Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114	06/28/2006	\$2,500.00	\$149,510.00

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.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR NATURE OF PROCEEDING AND LOCATION DISPOSITION AND CASE NUMBER

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.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

PROPERTY

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.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE. TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY**

DESCRIPTION AND VALUE OF

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.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT

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.)

NAME AND LOCATION

NAME AND ADDRESS OF COURT DATE OF DESCRIPTION AND VALUE OF

OF CUSTODIAN CASE TITLE & NUMBER ORDER **PROPERTY**

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.)

NAME AND ADDRESS OF DESCRIPTION AND RELATIONSHIP TO PERSON OR ORGANIZATION DEBTOR, IF ANY DATE OF GIFT VALUE OF GIFT

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.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None П

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 the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Deborah J. Greer 711 N. Carancahua Suite 424 Corpus Christi, TX 78475

DATE OF PAYMENT. NAME OF PAYOR IF OTHER THAN DEBTOR 07/13/2006

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY **Retainer 2864.80** Paid legal services/fees 2135.20 Filing Fees 1039.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

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.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

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

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.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

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.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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.

ADDRESS NAME USED DATES OF OCCUPANCY

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.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

TE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE 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.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

TE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

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.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER STATUS OR DISPOSITION

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.

LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER

NAME I.D. NO. ADDRESS NATURE OF BUSINESS ENDING DATES

Felipe Juarez, D.M.D. 20-1928499 Family Denistry dental practice 06-25-1995 to present

ipe Juarez, D.M.D. 20-1928499 Family Denistry
3151 McKinzie Road
Corpus Christi, TX 78402

Sti, 1A 70402

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.

NAME ADDRESS

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.)

BEGINNING AND

			7
	19. Books, records ar	nd financial statements	
None		s and accountants who within two years immed g of books of account and records of the debtor	liately preceding the filing of this bankruptcy case kept or
Bowman 1801 S. <i>A</i> Ste. 200	ND ADDRESS & Associates Alameda Christi, TX 78404		DATES SERVICES RENDERED 2004
None		ividuals who within the two years immediately s, or prepared a financial statement of the debto	preceding the filing of this bankruptcy case have audited the books r.
NAME Bowman	& Associates	ADDRESS 1801 S. Alameda Ste. 200 Corpus Christi, TX 78404	DATES SERVICES RENDERED 2004
None		viduals who at the time of the commencement f the books of account and records are not avail	of this case were in possession of the books of account and records able, explain.
NAME Donelda	Sluyter		ADDRESS 1801 S. Alameda Ste. 6 Corpus Christi, TX 78404
None		titutions, creditors and other parties, including rithin two years immediately preceding the con	mercantile and trade agencies, to whom a financial statement was immencement of this case.
Internal I P.O. Box	ND ADDRESS Revenue Service 21126 Dhia, PA 19114		DATE ISSUED Nov 2004
	20. Inventories		
None		last two inventories taken of your property, the and basis of each inventory.	name of the person who supervised the taking of each inventory,
DATE OF 07/12/06	INVENTORY	INVENTORY SUPERVISOR Felipe Juarez	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis) 20,070.00
None	b. List the name and a	ddress of the person having possession of the re	ecords of each of the two inventories reported in a., above.
DATE OF	INVENTORY	NAME AI RECORD:	ND ADDRESSES OF CUSTODIAN OF INVENTORY

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.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

Felipe Juarez

Family Denistry 3151 McKinzie Road Corpus Christi, TX 78402

07/12/06

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

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.

NAME ADDRESS

DATE OF WITHDRAWAL

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.

NAME AND ADDRESS

TITI E

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

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.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

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.

Date	July 14, 2006	Signature	/s/ Felipe Juarez	
			Felipe Juarez	

Debtor

Date July 14, 2006 Signature /s/ Cynthia Annette Juarez

Cynthia Annette Juarez

Joint Debtor

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

United States Bankruptcy Court Southern District of Texas

In re	Felipe Juarez e Cynthia Annette Juarez		Case No.	
		Debtor(s)	Chapter	11
	DISCLOSURE OF COMPENS			
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of or	of the petition in bankruptcy	, or agreed to be pai	d to me, for services rendered or to
	For legal services, I have agreed to accept		\$	5,000.00
	Prior to the filing of this statement I have received		\$	2,135.20
	Balance Due		\$	2,864.80
2.	\$			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation of the agreement, together with a list of the names	on with a person or persons v s of the people sharing in the	who are not members compensation is atta	or associates of my law firm. A ched.
5.	 In return for the above-disclosed fee, I have agreed to render a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statem c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Negotiations with secured creditors to red reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on hous 	ng advice to the debtor in detent of affairs and plan which and confirmation hearing, are luce to market value; exerts as needed; preparation	ermining whether to may be required; and any adjourned hea emption planning	file a petition in bankruptcy; rings thereof; ; preparation and filing of
7.	By agreement with the debtor(s), the above-disclosed fee de Representation of the debtors in any dischany other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement of any asbankruptcy proceeding.	greement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Date	ed: July 14, 2006	/s/ Deborah J. Gr		
		Deborah J. Green		
		Deborah J. Greer American Bank P		
		711 N. Carancahı	ıa	
		Corpus Christi, T 361-883-4444 Fa		
		djgreer@greerlav		

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Deborah J. Greer	X /s/ Deborah J. Greer	July 14, 2006
Printed Name of Attorney	Signature of Attorney	Date
Address:		
American Bank Plaza, Suite 424		
711 N. Carancahua		
Corpus Christi, TX 78475 361-883-4444		
Certi	ficate of Debtor	
I (We), the debtor(s), affirm that I (we) have received	d and read this notice.	
Felipe Juarez		
Cynthia Annette Juarez	X /s/ Felipe Juarez	July 14, 2006
Printed Name of Debtor	Signature of Debtor	Date
Case No. (if known)	X /s/ Cynthia Annette Juarez	July 14, 2006
	Signature of Joint Debtor (if any)	Date

United States Bankruptcy Court Southern District of Texas

	Felipe Juarez			
In re	Cynthia Annette Juarez		Case No.	
		Debtor(s)	Chapter	11
The ab		TEICATION OF CREDITOR nat the attached list of creditors is true and co		of their knowledge.
Date:	July 14, 2006	/s/ Felipe Juarez Felipe Juarez		
		Signature of Debtor		
Data	July 14, 2006	/s/ Cynthia Annette Juarez		
Date:	July 14, 2000			
		Cynthia Annette Juarez		

Signature of Debtor

ACS PO Box 7051 Utica, NY 13504-7051

Barbara C. Jue, Attorney Advisor Office of the U.S. Trustee 606 North Carancahua, Suite 1107 Corpus Christi, TX 78476

Capital One Bank PO Box 30285 Salt Lake City, UT 84130

HESAA PO Box 548 Trenton, NJ 08625-0548

Home Equity P.O. Box 13716 Sacramento, CA 95853-3716

Household Credit Services P.O. Box 80084 Salinas, CA 93912-0084

Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114

Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114

Internal Revenue Service STOP #5026AUS 300 E. 8th Street Austin, TX 78701

Medical Capital 4321 Goshen Road Fort Wayne, IN 46818-1242

Orthodontic Contracts

Sallie Mae PO Box 9500 Wilkes Barre, PA 18773-9500

State Comptroller 111 E. 17th Street Austin, TX 78774-0100

Stonewall Shopping Center, LTD 3151 McKenzie Corpus Christi, TX 78410

US Trustee 515 Rusk Suite 3516 Houston, TX 77002

In re	Felipe Juarez Cynthia Annette Juarez				
	Debtor(s)				
Case N	umber:(If known)				

STATEMENT OF CURRENT MONTHLY INCOME FOR USE IN CHAPTER 11

In addition to Schedules I and J, this statement must be completed by every individual Chapter 11 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part I. CALCULATIO	NC	OF CURREN	ЛT	MONTHLY I	NC	OME		
1	a. 🗖	al/filing status. Check the box that applies a Unmarried. Complete only Column A ("Del Married, not filing jointly. Complete only col Married, filing jointly. Complete both Colum	2-10. e") for Lines 2-10.			or I	ines 2-10			
	All figu bankru amour	ires must reflect average monthly income for tuptcy case, ending on the last day of the mont atts of income during these six months, you must, divide this total by six, and enter the result	the th bo ust t	six calendar months efore the filing. If yo total the amounts re	prio ou re ceive	r to filing the eceived different		Column A Debtor's Income		Column B Spouse's Income
2	Gross	wages, salary, tips, bonuses, overtime, c	com	nmissions.			\$	0.00	\$	0.00
3		come from the operation of a business, penter the difference on Line 3. Do not enter a				Spouse 0.00				
	b.	Ordinary and necessary business expenses	\$	0.00	\$	0.00				
	C.	Business income	Su	ubtract Line b from L	ine a	l	\$	0.00	\$	0.00
4	differe a.	ental and other real property income. Sul nce on Line 4. Do not enter a number less that Gross receipts	an z	Debtor 0.00	\$	Spouse 0.00				
	b.	Ordinary and necessary operating expenses	\$	0.00		0.00				
	C.	Rental income	S	ubtract Line b from I	Line	a	\$	0.00	\$	0.00
5	Intere	est, dividends, and royalties.					\$	0.00	\$	0.00
6	Pensi	on and retirement income.					\$	0.00	\$	0.00
7	deper	ar contributions to the household expens idents, including child or spousal support e if Column B is completed.					\$	0.00	\$	0.00
8	Howev benefi	ployment compensation. Enter the amount ver, if you contend that unemployment comper t under the Social Security Act, do not list the stead state the amount in the space below:	nsat	tion received by you	or y	our spouse was a				
		ployment compensation claimed to benefit under the Social Security Act Debtor	r\$	0.00 Spo	ouse	\$ 0.00	\$	0.00	\$	0.00
9	includ war cr	ne from all other sources. If necessary, list le any benefits received under the Social Secu ime, crime against humanity, or as a victim of and amount.	urity	Act or payments red	ceive	ed as a victim of a				
	a.		\$		\$	·				
	b.		\$	5	\$		1	2.22		2.22
		and enter on Line 9					\$	0.00	\$	0.00
10	comple	otal of current monthly income. Add I eted, add Lines 2 thru 9 in Column B. Enter th	he to	otal(s).			\$	0.00	\$	0.00
11	Line 1	current monthly income. If Column B D, Column B, and enter the total. If Column B ine 10, Column A.					\$			0.00

Part II. VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.)

Date: July 14, 2006

Signature: /s/ Felipe Juarez
Felipe Juarez
(Debtor)

Signature: /s/ Cynthia Annette Juarez
Cynthia Annette Juarez
(Joint Debtor, if any)

Form 1040	U	.S. Individual Income Tax Return	ZUU	O	(99) IRS Use (Only —	Do not	write or staple in this	s space.
	For the	year Jan 1 - Dec 31, 2005, or other tax year beginning	, 2005, en	ding	, 20			OMB No. 1545-00	74
Label		st name Mi Last name					Your	social security numb	per
(See instructions.)	FEI.	IPE JUAREZ						9950	
		nt return, spouse's first name MI Last name					Spou	se's social security :	number
Use the	1 '] Opou		il diffice t
IRS label. Otherwise,		THIA A. JUAREZ					١.	<u>-8356</u>	
please print	1	address (number and street). If you have a P.O. box, see instructions.			Apartment n	ο.		You must enter	-
or type.		CARDINAL LANE						social securit number(s) abo	
	City, to	wn or post office. If you have a foreign address, see instructions.		Sta	ite ZIP code		Chack	king a box below wil	
Presidential Election	COR	PUS CHRISTI, TX 78410					chang	ge your tax or refund	
Campaign	▶ ¢	eck here if you, or your spouse if filing jointly, want \$3 to go to this	fund? (see ir	struction	s)	►	Y	ou Spou	se
Filing Status	1	Single	4	Head	of household (wit	h qua	lifyind	person). (See	
i iiing Status	2	X Married filing jointly (even if only one had income)	·	instru	ctions.) If the qua	ılifying	pers	on is a child	
Charle ank	3	Married filing separately. Enter spouse's SSN above & full		name	ot your dependent here	i, ente	er unis	CNIIO S	
Check only one box.		name here ►	5		ing widow(er) with de	pendent	child ((see instructions)	
	-	(22)						Boxes checked	
Exemptions	6	7			K DOX ba	• • • • • •	-	on 6a and 6h	2
	ì	X Spouse			D	(4)	7	_ No. of children on 6c who:	
			endent's security		Dependent's relationship	(4) quali		• lived	
		T Social Commencer of the Commencer of t	ner	1 '	to you	child fo	r child		4
						(see i		● did not _ live with you	
			-2310	DAUG	HTER	Γ	7	due to divorce or separation	
			7672	DAUG	HTER		X)	(see instrs)	
If more than			-1975	DAUG	HTER		X	- Dependents on 6c not	
four dependents, see instructions.			-0085			1		_ entered above Add numbers	
								on lines	6
	7	Wages, salaries, tips, etc. Attach Form(s) W-2					7		, 213.
Income		Taxable interest. Attach Schedule B if required					8a		
	i	Tax-exempt interest. Do not include on line 8a		8b					
Attach Form(s)		Ordinary dividends. Attach Schedule B if required	. <i>.</i>				9a		
W-2 here. Also attach Forms		Qualfd divs (see instrs)		9b					
W-2G and 1099-R	10	Taxable refunds, credits, or offsets of state and local income taxes	(see instruc	tions)			10		
if tax was withheld.	11	Alimony received	<i></i>			[11		
M 101 = 41	12	Business income or (loss). Attach Schedule C or C-E				[12	129,	914.
If you did not get a W-2.	13	Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here			►		13		
see instructions.	14	Other gains or (losses). Attach Form 4797				[14		
	15 a	IRA distributions 15a			amount (see instr		15 b		
		Pensions and annuities 16a			amount (see instr		16ь		
F1 t- 1-4-		Rental real estate, royalties, partnerships, S corporal				-	17		
Enclose, but do not attach, any		Farm income or (loss). Attach Schedule F Unemployment compensation				- t-	18 19		
payment. Also,		Social security benefits			amount (see instr	1	20ь	2.111	
please use F orm 1040-V .	21	Other income			•		21		
	22	Add the amounts in the far right column for lines 7 th	rough 21.	This is	your total incom	e F	22	141,	127.
	23	Educator expenses (see instructions)		23					
Adjusted	24	Certain business expenses of reservists, performing artists, and fee-	basis						
Gross		government officials. Attach Form 2106 or 2106-EZ	1	24					
Income	25	Health savings account deduction. Attach Form 8889.		25					
	26	Moving expenses. Attach Form 3903	ł ł	26					
	27	One-half of self-employment tax. Attach Schedule SE		27	7,3	20.			
	28	Self-employed SEP, SIMPLE, and qualified plans		28					
	29	Self-employed health insurance deduction (see instructions)		29	2,9	46.			
	30	Penalty on early withdrawal of savings		30					
		Alimony paid b Recipient's SSN ▶		31 a					
	32	IRA deduction (see instructions)		32	3	A E	ĺ		
		Student loan interest deduction (see instructions)	+	33	1,3	45.			
	34 35	Tuition and fees deduction (see instructions) Domestic production activities deduction, Attach Form 8903	,	34	1,3.	- / -			
		Add lines 23 - 31a and 32 - 35					36	11.	928.
		Subtract line 36 from line 22. This is your adjusted or				•		129.	199.

Form 1040 (2005)	FELIPE AND CYNTHIA A. JUAREZ		o-9950 Page 2
Tax and	38 Amount from line 37 (adjusted gross income)	<i>3</i> 8	129,199.
Credits	39a Check You were born before January 2, 1941, Blind. Total boxes		
	if: Spouse was born before January 2, 1941, Blind. checked ▶ 39 a	1	
Standard Deduction	b If your spouse itemizes on a separate return, or you were a dual-status alien, see instructions and check here	i	
for - People who	40 Itemized deductions (from Schedule A) or your standard deduction (see left margin).	40	10,752.
checked any box	41 Subtract line 40 from line 38.	41	118,447.
on line 39a or 39b or who can	42 If line 38 is over \$109,475, or you provided housing to a person displaced by Hurricane Katrina, see		
be claimed as a	instructions. Otherwise, multiply \$3,200 by the total number of exemptions claimed on line 6d	42	19,200.
dependent, see instructions.	If line 42 is more than line 41, enter -0-	43	99,247.
	44 Tax (see instrs). Check if any tax is from: a Form(s) 8814 b Form 4972	44	18,136.
All others:	45 Alternative minimum tax (see instructions). Attach Form 6251	45	0.
Single or Married	46 Add lines 44 and 45	46	18,136.
filing separately, \$5,000	47 Foreign tax credit. Attach Form 1116 if required		
\$5,000	48 Credit for child and dependent care expenses. Attach Form 2441	1	
Married filing	49 Credit for the elderly or the disabled. Attach Schedule R 49	1	
jointly or Qualifying	50 Education credits. Attach Form 8863		
widow(er),	51 Retirement savings contributions credit. Attach Form 8880 51	1 1	
\$10,000	52 Child tax credit (see instructions). Attach Form 8901 if required		
Head of	53 Adoption credit. Attach Form 8839. 53		
household, \$7,300	54 Credits from: a Form 8396 b Form 8859		
	55 Other credits. Check applicable box(es): a Form 3800		
	b Form c Form		
	56 Add lines 47 through 55. These are your total credits.	56	2,000.
	57 Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	57	16,136.
	58 Self-employment tax. Attach Schedule SE	58	14,639.
Other	59 Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	59	
Taxes	60 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	
	61 Advance earned income credit payments from Form(s) W-2	61	
	62 Household employment taxes. Attach Schedule H	62	
	63 Add lines 57-62. This is your total tax.	63	30,775.
Payments	Federal income tax withheld from Forms W-2 and 1099 64 376. 376. 2005 estimated tax payments and amount applied from 2004 return 65 30, 500.		
If you have a	65 2005 estimated tax payments and amount applied from 2004 return 65 30, 500. 66a Earned income credit (EIC)		
child, attach	b Nontaxable combat pay election > 66 b		
Schedule EIC.	67 Excess social security and tier 1 RRTA tax withheld (see instructions) 67		
	68 Additional child tax credit. Attach Form 8812 68		
	69 Amount paid with request for extension to file (see instructions)		
	70 Payments from: a Form 2439 b Form 4136 c Form 8885 70		
	71 Add lines 64, 65, 66a, and 67 through 70. These are your total payments.	71	30,876.
Refund	72 If line 71 is more than line 63, subtract line 63 from line 71. This is the amount you overpaid.	72	101.
Direct deposit?	73a Amount of line 72 you want refunded to you	73a	101.
See instructions	► b Routing number XXXXXXXXXX		
and fill in 73b, 73c, and 73d.	► d Account number		
	74 Amount of line 72 you want applied to your 2006 estimated tax		
Amount	75 Amount you owe. Subtract line 71 from line 63. For details on how to pay, see instructions	75	
You Owe	76 Estimated tax penalty (see instructions)		
Third Party	Do you want to allow another person to discuss this return with the IRS (see instructions)?	plete t	he following. No
Designee ´	Designee's PREPARER Phone no. ►	ersonal umber (identification PIN)
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which pro-	est of mapped and a second	y knowledge and as any knowledge.
Here	Your signature Date Your occupation		me phone number
Joint return? See instructions.	DENTIST		
Keep a copy	Spouse's signature. If a joint return, both must sign. Date Spouse's occupation	1	
for your records.	OFFICE MANAGER		
	Date	Prep:	arer's SSN or PTIN
Paid	Preparer's Noselka Willeughe CPA 7-6-06 Check if self-employed X	_	5131
Preparer's	Firm's name DONELDA D. SLUYTER, CPA		
Use Only	(or yours if self-employed) 9741 WILKINS DR.		
-	address, and CORPUS CHRISTI, TX 78410 Phone no.	(36	51) 241-0126

SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on Form 1040

Itemized Deductions

► Attach to Form 1040. ► See Instructions for Schedule A (Form 1040).

OMB No. 1545-0074

2005 Attachment Sequence No. 07 Your social security number

FELIPE AN	ND C	YNTHIA A. JUAREZ				-9950
Medical		Caution. Do not include expenses reimbursed or paid by others.				
and Dental	1		1			
Expenses	2	Enter amount from Form 1040, line 38 2			1	
•	3	Multiply line 2 by 7.5% (.075)	3			
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0			4	0.
	5	State and local (check only one box):				
		a Income taxes, or	5	2,010.		
Taxes You		b X General sales taxes (see instructions)			1	
Paid	6		6	3,489.	1	
(See	7	Personal property taxes	7	······································		
instructions.)	8	Other taxes. List type and amount				
	9	Add lines 5 through 8	8		9	5,499.
Interest	10	Add lines 5 through 8. Home mtg interest and points reported to you on Form 1098.	10	4,649.	3	5,433.
You Paid	11			4,045.		
(See instructions.)						
N			1,1			
Note. Personal	12	Points not reported to you on Form 1098. See instrs for spc1 rules	11			
interest is		Investment interest. Attach Form 4952 if required.	12			
not deductible.	13	(See instrs.).	13			
acadonoio.	14	Add lines 10 through 13.			14	4,649.
Gifts to		Total gifts by cash or check. If you made any gift of \$250 or	T			.,
Charity		more, see instrs	15a	604.		
If you made a gift and		o Gifts by cash or check after August 27, 2005, that you elect to treat as qualified contributions (see instructions)				
got a benefit for it, see instructions.	16	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500.	16			
	17	Carryover from prior year.				
		Add lines 15a, 16, & 17.			18	604.
Casualty and Theft Losses	19	Casualty or theft loss(es). Attach Form 4684. (See instructions.).			19	0.
Job Expenses and Certain Miscellaneous	20	Unreimbursed employee expenses — job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.)				
Deductions			1 1			
				İ		
	21	Tou proporation food	20			
(See instructions.)	22	Tax preparation fees	21			
			22		- 1	
	23	Add lines 20 through 22.	23		-	
	24	Enter amount from Form 1040, line 38 24				
	25	Multiply line 24 by 2% (.02)	25			
	26	Subtract line 25 from line 23. If line 25 is more than line 23, enter	-0		26	0.
Other	27	Other — from list in the instructions. List type and amount ▶				
Miscellaneous Deductions					~	0
	20	In Earn 1040 line 20 6145 050 (670 075 (.) 450 0			27	<u> </u>
Total Itemized Deductions	28	Is Form 1040, line 38, over \$145,950 (over \$72,975 if MFS)? X No. Your deduction is not limited. Add the amounts in the fail	right only	, ma		
		Your deduction is not limited. Add the amounts in the far for lines 4 through 27. Also, enter this amount on Form Yes. Your deduction may be limited. See instructions for the a	1040, line	40.	28	10,752.
	29	If you elect to itemize deductions even though they are less than your standard deduc				

SCHEDULE C

Department of the Treasury Internal Revenue Service

(Form 1040)

Profit or Loss From Business (Sole Proprietorship)

► Attach to Form 1040 or 1041. ► See Instructions for Schedule C (Form 1040).

➤ Partnerships, joint ventures, etc, must file Form 1065 or 1065-B.

OMB No. 1545-0074

2005

Attachment Sequence No. 09

Name of proprietor Social security number (SSN) FELIPE JUAREZ -9950A Principal business or profession, including product or service (see instructions) Enter code from instructions DENTAL SERVICES ► 621210 C Business name. If no separate business name, leave blank. Employer ID number (EIN), if any FELIPE JUAREZ, DMD 20-1928499 Business address (including suite or room no.) 3153 MCKINZIE ROAD City, town or post office, state, and ZIP code Ε CORPUS CHRISTI, TX 78410 F X Cash Accounting method: (1) Other (specify) (2) Accrual (3) Did you 'materially participate' in the operation of this business during 2005? If 'No,' see instructions for limit on losses.... No H If you started or acquired this business during 2005, check here..... Part I Income Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the Statutory employee' box on that form was checked, see the instructions and check here... 1 271,308. 2 2,137. 2 Returns and allowances 269,171. 3 Subtract line 2 from line 1..... 3 Cost of goods sold (from line 42 on page 2)..... 4 5 Gross profit. Subtract line 4 from line 3... 5 269,171. Other income, including Federal and state gasoline or fuel tax credit or refund 6 7 269,171 Gross income. Add lines 5 and 6. Part II **Expenses.** Enter expenses for business use of your home only on line 30. 5,019. 6,161. 8 18 Office expense..... 18 Pension and profit-sharing plans 19 Car and truck expenses 4,748. 9 (see instructions)..... 20 Rent or lease (see instructions): 10 Commissions and fees a Vehicles, machinery, and equipment..... 20 a 22,230. 20 b **b** Other business property Contract labor 205 21 Repairs and maintenance..... 21 2,497. (see instructions) 11 11,884. 12 22 Depletion Supplies (not included in Part III) . . 23 4,270. Depreciation and section Taxes and licenses...... 179 expense deduction (not included in Part III) 24 Travel, meals, and entertainment: 2,806 (see instructions) 13 24 a 448. Employee benefit programs (other than on line 19)..... 14 **b** Deductible meals and entertainment 24b 678. Insurance (other than health)... 15 1,814. 25 3,589. 16 Interest: 26 Wages (less employment credits)... 26 33,659. 27 32,020. Other expenses (from line 48 on page 2). . . . a Mortgage (paid to banks, etc). . . . 16a 16b **b** Other..... 17 7,229. 17 Legal & professional services 139,257. Total expenses before expenses for business use of home. Add lines 8 through 27 in columns. 28 129,914. 29 Tentative profit (loss). Subtract line 28 from line 7..... Expenses for business use of your home. Attach Form 8829. 30 Net profit or (loss). Subtract line 30 from line 29. If a profit, enter on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, see instructions). Estates and trusts, enter on Form 1041, line 3. 31 129,914. If a loss, you must go to line 32. 32 If you have a loss, check the box that describes your investment in this activity (see instructions). If you checked 32a, enter the loss on Form 1040, line 12, and also on Schedule SE, line 2 All investment is (statutory employees, see instructions). Estates and trusts, enter on Form 1041, line 3 Some investment If you checked 32b, you must attach Form 6198. Your loss may be limited. is not at risk.

Sch	edule C (Form 1040) 2005 FELIPE JUAREZ	-9950	Page 2
,	t III Cost of Goods Sold (see instructions)		
	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach	explanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If 'Yes,' attach explanation		s No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36	Purchases less cost of items withdrawn for personal use	36	
37	Cost of labor. Do not include any amounts paid to yourself	37	
38	Materials and supplies	38	
39	Other costs	39	
40	Add lines 35 through 39	40	
41	Inventory at end of year	41	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42	
			not
	Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file form	Form 4562.	
43	When did you place your vehicle in service for business purposes? (month, day, year)	'	
	Of the total number of miles you drove your vehicle during 2005, enter the number of miles you used your vehicle		
a	a Business b Commuting cOther		
45	Do you (or your spouse) have another vehicle available for personal use?	Yes	S No
46	Was your vehicle available for personal use during off-duty hours?	Yes	i No
47 a	Do you have evidence to support your deduction?	Yes	, No
	of 'Yes,' is the evidence written?	Yes	No
Par	tV Other Expenses. List below business expenses not included on lines 8-26 or line 30.		
200	STATEMENT 1		
355	STATEMENT 1		
		1	
48	Total other expenses. Enter here and on page 1, line 27.	48 33	2,020.
		chedule C (Form 1	

SCHEDULE SE (Form 1040)

Self-Employment Tax

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

► Attach to Form 1040. ► See Instructions for Schedule SE (Form 1040).

Attachment Sequence No. 17

Name of person with self-employment income (as shown on Form 1040) FELIPE JUAREZ

Social security number of person with self-employment income >

-9950

Who Must File Schedule SE

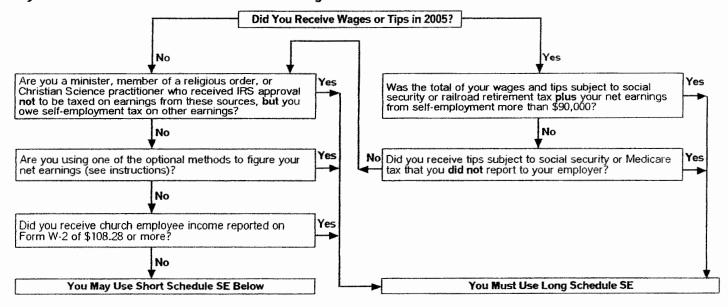
You must file Schedule SE if:

- You had net earnings from self-employment from other than church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, or
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order is not church employee income (see instructions).

Note. Even if you had a loss or a small amount of income from self-employment, it may be to your benefit to file Schedule SE and use either 'optional method' in Part II of Long Schedule SE (see instructions).

Exception. If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361 and received IRS approval not to be taxed on those earnings, do not file Schedule SE. Instead, write 'Exempt - Form 4361' on Form 1040, line 58.

May I Use Short Schedule SE or Must I Use Long Schedule SE?



Section A -- Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1	
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9. Ministers and members of religious orders, see instructions for amounts to report on this line. See instructions for other income to report	2	129,914.
3	Combine lines 1 and 2	3	129,914.
4	Net earnings from self-employment. Multiply line 3 by 92.35% (.9235). If less than \$400, do not file this schedule; you do not owe self-employment tax.	4	119,976.
5	Self-employment tax. If the amount on line 4 is:		
	• \$90,000 or less, multiply line 4 by 15.3% (.153). Enter the result here and on Form 1040, line 58.		
	 More than \$90,000, multiply line 4 by 2.9% (.029). Then, add \$11,160.00 to the result. Enter the total here and on Form 1040, line 58. 	5	14,639.
6	Deduction for one-half of self-employment tax. Multiply line 5 by 50% (.5). Enter the result here and on Form 1040, line 27		

Form **4562**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

b 12-year.....

c 40-year

Part IV Summary (see instructions)

21 Listed property. Enter amount from line 28

For assets shown above and placed in service during the current year, enter

the portion of the basis attributable to section 263A costs.....

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2005

Attachment Sequence No. 67

S/L

S/L

S/L

21

F. 4FC0 (0000) (D.

2,806.

FELIPE AND CYNTHIA A. JUAREZ -9950 Business or activity to which this form relates SCHEDULE C - FELIPE JUAREZ, DMD Relection To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I. \$105,000. 2,544. Total cost of section 179 property placed in service (see instructions)..... 2 \$420,000. Threshold cost of section 179 property before reduction in limitation. 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0: 0. 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-, If married filing separately, see instructions..... 105,000. 6 (a) Description of property (b) Cost (business use only) (C) Elected cost 2,544 SEE STATEMENT 0. Listed property. Enter the amount from line 29. 2,544. Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7..... 8 Tentative deduction. Enter the smaller of line 5 or line 8..... 2,544. 9 Carryover of disallowed deduction from line 13 of your 2004 Form 4562..... 10 0. 10 105,000. Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs).... 11 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11... 12 2,544 Carryover of disallowed deduction to 2006. Add lines 9 and 10, less line 12...... 0 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special allowance for certain aircraft, certain property with a long production period, and qualified New York Liberty or GO Zone property (other than listed property) placed in service during the tax year (see instrs).... 14 15 Property subject to section 168(f)(1) election. 15 16 Other depreciation (including ACRS)..... 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions) Section A 262. 17 MACRS deductions for assets placed in service in tax years beginning before 2005...... If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here... Section B — Assets Placed in Service During 2005 Tax Year Using the General Depreciation System (g) Depreciation (b) Month and (C) Basis for depreciation (e) Convention (a) Classification of property (business/investment use year placed in service Recovery period only - see instructions) 19a 3-year property..... **b** 5-year property...... c 7-year property..... d 10-year property..... e 15-year property... f 20-year property... 25 yrs S/L g 25-year property... 27.5 yrs MM S/L h Residential rental 27.5 yrs MM S/L 39 vrs MM S/L i Nonresidential real MM S/L Section C - Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System

12 yrs

40 vrs

MM

23

Section B - Information on Use of Vehicles

28

0 **29**

0.

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1.....

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1.....

30	Total business/investment miles driven during the year (do not include commuting miles)	1	(a) icle 1		cie 2	1	c) licle 3	1	d) icle 4	1	e) cle 5	1	f) cle 6
31	Total commuting miles driven during the year												
32	Total other personal (noncommuting) miles driven												
33	Total miles driven during the year. Add lines 30 through 32												
	_	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34	Was the vehicle available for personal use during off-duty hours?												
35	Was the vehicle used primarily by a more than 5% owner or related person?												
36	Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

27	Do you maintain a written policy statement the	at prohibite all pers	onal use of vehicles	including commi	rtina	Yes	No
3,	by your employees?				g,		
38	Do you maintain a written policy statement the employees? See the instructions for vehicles	at prohibits persona used by corporate	al use of vehicles, e officers, directors, (except commuting, or 1% or more own	by your ers		
39	Do you treat all use of vehicles by employees	as personal use?					
40	Do you provide more than five vehicles to you vehicles, and retain the information received?	r employees, obtai	n information from		out the use of the		
41	Do you meet the requirements concerning qua	alified automobile d	emonstration use?	(See instructions)	. <i></i>		
	Note: If your answer to 37, 38, 39, 40, or 41 is						
Par	t VI Amortization						
	(a)	(b)	(c)	(d)	(e)	(f)	
	Description of costs	Date amortization	Amortizable	Code	Amortization	Amortizatio	п

	CVI Amorazadon						
	(a)	(b)	(c)	(d)	(e)		(f)
	Description of costs	Date amortization begins	Amortizable amount	Code section	Amortiza period percent	or	Amortization for this year
42	Amortization of costs that begins during your	2005 tax year (see	instructions):				
43	Amortization of costs that began before your	2005 tax year			[43	
44	Total. Add amounts in column (f). See instru	ictions for where to	report		[44	

2005	FEDERAL STATEMENTS		PAGE
CLIENT JUAR950	FELIPE AND CYNTHIA A. JUAREZ		ა-99
7/06/06			06:201
BUSINESS COMPUTER SUPPORT CREDIT CARD FEES DUES AND SUBSCRIPTIONS EMPLOYEE GOODWILL LABORATORY FEES LICENSE AND PERMITS MEDICAL BOOKS MISCELLANEOUS PAGER SERVICE POSTAGE SECURITY TELEPHONE U.S. TRUSTEE PAYMENTS	ERVICES		421. 1,014. 3,336. 695. 939. 15,510. 660. 95. 1,164. 110. 673. 1,229. 4,056. 1,295. 322.
STATEMENT 2			***************************************
	ERTAIN TANGIBLE PROPERTY (SECTION 179		
DESCRIPTION OF PROPERT	Υ	COST	ELECTED COST
DESCRIPTION OF PROPERT 7-YEAR DENTAL CART 5-YEAR COMPUTER EQUIPS 5-YEAR COMPUTER EQUIPS	·		\$ 1,624. 372. 429. 119.

	Initials	Date
Prepared By		ALEXT COMMON
Approved By	1	

© WILSON JONES G7504 ColumnWrite ® 0.0 TOTAL DEPOSITS PER BANK. 0.00 * 22,717.02 + LESS: 4000 CR 31,391.38 + TO FUB REDEPOSITED 28,696.58 + 27,478.39 + ON 1-17-06 26,501.58 + 24,936.59 + 161,721.54 * + CINDY'S SALARY

Felipe Juarez Schedule of Expenses January 1, 2006 - June 30, 2006

Accounting Fees	<u>\$</u>	3116
Advertising		1756
Bank Credit Card Charges		1669
Business Promotion		139
Contract Labor		933
Dental Supplies		10981
Donations		50
Dues and Subscriptions		491
Insurance:Malpractice Insurance		770
Laboratory Fees		9082
Licenses and Permits		350
Meals & Entertainment		42
Office Supplies		2794
Payroll Expenses		26520
Petty Cash		7
Postage & Delivery		304
Professional Consulting		500
Refunds		810
Rent		11100
Repairs & Maintenance		126
Security		143
Taxes:Payroll		43
Telephone		2154
Uniforms		141
Utilities		2300
Six-month Total		76322
Monthly expenses		12720





	2005 Expense			nded			
Accounting Fees	7,058.88	January	February 2000	March 1116	April	May	June
Advertising	5,019.43	and the state of t		7,10		756.04	1000
Automobile Expense	681.54					The street of th	
Bank Charges	500.90	62.66	6 219.78	169.68	286.44	347.44	582.95
Bookkeeping Service	110.00						
Business Promotion	420.76		100	39		384	
Collection Agency	500.00		a transfer of the second				
Contract Labor	**************************************	205	5 63		340	290	35
Credit Card Fees	3,336.36	100	1911				
Dental Supplies	11,884.21	3498.3	3 376.65	2358.43	237.93	2242.91	2267.1
Depreciation							10.00
Donations	175.00					50	
Dues and Subscriptions	694.50			461	29.95		
E-BUSINESS	9.95	10000					
Employee Goodwill	939.02	11.112	THE STATE OF THE S		The second state of the se		A distribution of the
Insurance:Disability Insurance	5,383.62	100000000000000000000000000000000000000			The state of the s		
Insurance:Liability Insurance	783.00				77.77		
Insurance:Life Insurance	2,046.50	1000				1	
Insurance:Malpractice Insurance	1,031.00		248	261			261
Insurance:SE Health Insurance	2,946.00						
Laboratory Fees	15,510.11	1400	0 1703.94	1958.35	1327.1	1561	1131.64
Licenses and Permits	660.00			25	325		
Meals & Entertainment	414.17	41.68	8				
Medical Books	94.95						
Miscellaneous	1,023.36						
Office Supplies	4,421.39	312.17	7 354.3	353.28	449.04	844.69	480.21
Overpayment	623.10						
Pager Service	109.92						
Payroll Expenses	35,264.74	2792.33	3739.15	3540.68	4646.65	5276.31	6524.5
Petty Cash	875.00			17 d d d d			
Postage & Delivery	673.18		39		63	100.39	10:
Professional Consulting	60.00						500
Refunds	1,008.64				55	516	12:
Rent	20,350.00	1850	0 1850	1850	3700		185

Total disb per bank statement		Personal/unidentified		Other Expenses	Wages:Payroll Adjustment	Wages	Utilities	Uniforms	Uncategorized Payroll	U.S. Trustee	Travel	Telephone	Tech Support	Taxes:TWC	Taxes:Property	Taxes:Payroll	Taxes:Futa	Security	Returned Deposit	Repairs & Maintenance
			280,880.18	279.20			3,588.73	143.35	731.61	1,295.20		4,056.15	1,013.50	148.01	1,316.34	6,195.16	394.95	1,228.66	478.68	2,496.50
22728.9	22842.7	11966.8	10875.9				295.33	The state of the s				332.85				13.81			AND A STATE OF THE	42.77
26373.61	26373.61	15214.77	11158.84				221.97	141.21		A A A A A A A A A A A A A A A A A A A		91.84								
26373.61 28482.59	28482.59	15685.78	12796.81				339.36				William I am a market and a mar	145.05						71.45		33.53
26515.19	26515.19	14266.83	12248.36	77.7.7		A CONTRACTOR OF THE PERSON OF	352.48	and the same of th				356.97				28.8				50
26515.19 28602.39 27010.27		15269.41	13332.98				626.62	A STATE OF THE STA				721.58								
27010.27	28602.39 27010.27	11101.64	15908.63	The state of the s			464.63					506.15						71.45		
	159826.75	83505.23	76321.52	0	0	0	2300.39	141.21	0	0	0	2154.44	0	0	0	42.61	0	142.9	0	126.3