## FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

# STREETSIDE LOCATION! 65+ NEW PATIENTS PER MONTH! 75% PEDO! DENTICAL! CASH ORTHO! HIGH NET PRACTICE!

LISTING #	20 - 246		PRIC	PRICE: MAKE OFFER!			A/R'S: NEGOTIABLE				
<b>LOCATION:</b>	East	East Los Angeles		<b>Est.</b> (1980) 2018			POPULATION: Hispanic				
DESCRIPTIO	CRIPTION: # of Ops: 4		4 # N	# Not Plumbed:			<b>Sq. Ft.</b> 1,200				
Lease X	Own Opti		ption/Renew	ion/Renew 1 x 5 Yrs. Re		1+	\$/Mo	<b>\$/Month</b> \$4,000			
Office Hours	$\mathbf{M}$	Т	W	TH		FR	SAT	SU	N		
	9 – 5	Staff	Ortho	1x $9-5$	A	9 – 5	9 – 3	clos	sed		
<b>STAFF</b>		1 + 1		\$16 MGR - \$26	•		Will Stay	•			
		2	_	\$14			Will Stay Yes				
	Other: Associate			<b>Salary:</b> \$650 / d			Will Stay	ay Yes			
	Other:	Ortho		\$1,200 + 3			Will Stay				
	Other:	1 marketers	Salary:	\$	14		Will Stay	Yes			
PATIENT PRO	OFILE:		_				_				
% Group	5-10 Y	rs: 32%	11-19 Yrs:	44%	20-49	Yrs:	21%	50-75+:	3%		
% Reimb	Ca	ash 10%	Idemn		I	PPO 5%		Plans			
	Medi	cal 85%		0%	Avg. Ca	р	\$0	_			
%Revenue	Restorat	ive <u>77%</u>	_ Crown & B	ridge <u>4%</u>	E	ndo	4%	Perio	2%		
Oral Surgery 6% Prosthetics 0% Ortho 7% (cash only)											
Procedures referred out:											
PRACTICE ST	ΓΑΤ <b>S:</b> *(N	leed to verify	with Buver Au	ıdit) (annrox)							
		•	1,500+		of Recalls	per month	*				
# of New P											
		·		— of practice reve			es	No			
•				Number of days			% of Gross 23%				
FINANCIAL: (Need to verify with Tax Returns and Financial Information by Seller)											
				<b>2019</b> \$508,99			ent YTD \$21	8,974 as of	f 8/31		
EQUIPMENT:	<u>.</u>										
# Cha	airs	4	Hygiene			Avg. Ag	geN	lixed			
			Pano								
Chariel Easter	owned.	Lagar									
Special Equip owned: Laser Intraoral Camera Yes Other											
Is the practice computerized? Yes Type of Software: Dentrix  COMMENTS: Seller has been out state for several months. Associate 1 day per week. Staff does pedo cleanings 3 days											

Phone: (949) 548-4559 ● Fax: (949) 548-0525 ● <u>www.firstchoicedds.com</u>
ALL INFORMATION PROVIDED SUBJECT TO BUYER VERIFICATION – BROKER MAKES NO WARRANTIES

per week. Tons of patients and work being sent out! Patients keep coming and PRACTICE NEEDS A DOCTORS ASAP! BIG NUMBERS HERE FOR FULL-TIME DENTIST!

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# **REGISTRATION AGREEMENT - CONFIDENTIALITY**

IMPORTANT: Please fax back this form to obtain the office location and financial data @ 949-548-0525

In consideration of FIRST CHOICE PRACTICE SALES INC., hereinafter called FIRST CHOICE, supplying me with confidential information concerning the following businesses, or any other businesses to which you may otherwise introduce me, I agree to use such confidential information obtained only for purposes of evaluation to purchase. I further agree not to divulge such information to others, except to secure professional advice. I further agree not to directly contact the owner, employees, landlord, suppliers or disturb any business relationship which includes requesting a position as an associate or asking for permission to visit the practice during practice hours of the seller without first obtaining seller's permission through FIRST CHOICE PRACTICE SALES, INC.

Should I, or anyone to whom I have introduced those confidential business listings that you previously presented to me, purchase or acquire an interest in any of those businesses, I agree to conduct all negotiations through your office. I further understand that the seller will be responsible for the payment of the commission to **FIRST CHOICE PRACTICE SALES**. I further understand and agree that if I should purchase all or any portion, lease, become an associate of or come into possession of the business through direct negotiations with the seller and without **FIRST CHOICE's** involvement, within one year from date hereof, then a commission is due **FIRST CHOICE** and I will assume responsibility for the payment of that commission.

The commission referred to above is ten percent (10%) of the total purchase price or \$12,500, whichever is greater. Should any controversy arise as a result of this agreement, **FIRST CHOICE** and I hereby agree to have the matter settled by and under the rules of the American Arbitration Association without the necessity of a court order. All rights of discovery allowed by law may be used and the prevailing party shall be entitled to actual attorney fees and costs. Any decision shall be final and binding upon myself and **FIRST CHOICE**.

#### NO AGENCY RELATIONSHIP IS CREATED BY SIGNING THIS AGREEMENT.

Listing No. <u>20 - 246</u>	Location	East Los Angeles			
Accepted and Agreed to:					
Signature		Agent			
Print Name		Print Name			
Date		Date			
Address		P. O. Box 8445 Newport Beach, CA 92660 (949) 548-4559			
City	ip	Any additions or deletions to this page other than information we have			
Phone (Circle One: Mobile/Home/Business)	)	requested will void your request and we will not provide any additional information. Thank you.			
E-mail Address		· · · · · · · · · · · · · · · · · · ·			

PLEASE FAX BACK TO: 949 548-0525