FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

CORNER LOCATION! MOSTLY PPO! LOW RENT! LONG TIME STAFF WILL STAY!

LISTING #	<u>23 – 232</u> PRI		RICE: \$199,000 OBO A			R'S: Negotiable				
LOCATION:	Lynwood		Est. 2020 (1980) POPI		JLATION: Mixed Hispanic					
DESCRIPTION:	# of Op	# of Ops: 3								
Lease X	Own	Option/Re	enew <u>1</u>	Yrs. Remain	n 7 years	rs \$/Month \$2,400 total				
Office Hours	M	T	W	TH	FR	SAT	-	SUN		
	9-6	9 - 62x	9 – 6	9 - 62x	Closed	Close	ed (Closed		
STAFF	Front:	1	Salary:	\$23/hr	Will Stay Yes (30 years)		years)			
	Back:	1	Salary:	\$18/hr	<u> </u>	ill Stay	Yes	8		
	Other:	Associate	Salary:		W	ill Stay _				
PATIENT PROFILE:										
% Group	5-10 Yrs:	5% 11-	-19 Yrs:15	5% 20-4	9 Yrs:	60%	50-75+:	20%		
% Reimb	Cash	40%	Idemn		PPO	55%	Plans			
	Medical	15%	Cap 0	% Avg.	. Cap		-			
% Revenue	Restorative	15% Crow	n & Bridge _	35%	Endo	15%	Perio	30%		
	Oral Surgery	5%	Prosthetics _		Ortho	0	.			
Procedures referred out: Molar Endo, Hard Extractions, Ortho										
PRACTICE STATS: *(Need to verify with Buyer Audit) (approx)										
# Active Charts			830 # 0		of Recalls per month*		60+			
# of New Patients per month* 15 Total # of New Patients YTD*										
Any one referral source account for more than 10% of practice revenue? Yes No										
Does practice employ a hygienist? No Number of days % of Gross										
FINANCIAL : (Need	d to verify with	Tax Returns	and Financial	Information b	y Seller)					
2020 \$201	,690	2021 \$256	<u>6,498</u> 2	022 \$185,5	81 Curren	t YTD _	Pending	2023		
EQUIPMENT:										
# Chairs	3	Hygiene			Avg. Ag	Avg. Age		Varies		
# X-Rays	1	Pano	Yes	Other	Portable x-ray Dexicon					
Special Equip owne	d: Las	er No	Intraoral	Camera	No	Other	X-ray So	canner		
Is the practice computerized? Yes Type of Software: Dentrix										
	eller cannot keep m patients here			ntly only one o	day per week.	Long-time				

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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>23 – 232</u>	Location	Lynwood			
Accepted and Agreed to:					
Signature		Agent			
Print Name	<u> </u>	Print Name			
Date		Date			
Address		P. O. Box 8445 Newport Beach, CA 92660 (949) 548-4559			
City	Zip	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