FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

BUSY STREETSIDE STRIP CENTER! RECENTLY REMODELED & NEW COMPUTERS! SELLER CANNOT MANAGE SECOND OFFICE!

LISTING #	23 - 542	PRIC	E: \$139	\$139,000 OBO		/R'S: Ne	egotiable	_	
LOCATION:	Anaheim	Est.	(2002) 7/	POPULATION:		N:H	Hispanic		
DESCRIPTION:	# of O _I	os: 4	# Not Plum	bed:	Sq. Ft. 1,200 sq ft				
Lease	Own	Option/Re	enew 1 x 5	Yrs. Remain	n 4+	\$/Month	\$3,633 total		
Office Hours	M	T	W	ТН	FR	SAT	SI	UN	
	9 – 5	Closed	Closed	9 – 5	Closed	Closed	Clo	osed	
PATIENT PROF	ILE:								
% Group	5-10 Yrs:	11-	19 Yrs:	20-49 Yrs: 50-75+:					
% Reimb	Cash	15%	Idemn		PPO	15%	Plans		
	Medical	70%	Cap ()% Avg.	. Cap	\$0			
% Revenue	Restorative	49% Crow	n & Bridge _	34%	Endo	2%	Perio	5%	
	Oral Surgery	5%	Prosthetics	5%	Ortho	0%			
Procedures referred out: Implants, some OS and Endo, ortho									
PRACTICE STATS: *(Need to verify with Buyer Audit) (approx) # Active Charts 300 - 400 # of Recalls per month* # of New Patients per month* 15 - 20 Total # of New Patients YTD*									
Any one referral source account for more than 10% of practice revenue? Yes No									
Does practice emp	?1	NO Number of days			% of Gross				
FINANCIAL: (Need to verify with Tax Returns and Financial Information by Seller)									
2020	NA 202	1 NA	2022 \$5	0K - 3 months	Curren	t YTD\$10	OK-20K per	month	
EQUIPMENT:									
# Chai	rs3	Hygiene	e		Avg. A	Age	mixed		
# X-Ra	ys 1 digital	Pano	No No	Other					
Special Equip ow	ned: La	ser No	Intraora	Intraoral Camera		Other			
Is the practice con		Yes Type of So							
COMMENTS: Scannot work due to of Anaheim. Walk	primary office	in San Gabriel	Valley being to	oo busy. Busy	strip center ar	nd great signa	_		

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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 – 542</u>	Location	Anaheim			
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 Z	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		<u> </u>			

PLEASE FAX BACK TO: 949 548-0525