

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90033 026 ***150.00

DOCUMENT # P05000067277

1. Entity Name
CAROLINA AKERMAN DMD P.A.



Principal Place of Business
20533 BISCAYNE BLVD
293
AVENTURA, FL 33180 US

Mailing Address
20533 BISCAYNE BLVD
293
AVENTURA, FL 33180 US

40056875



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02212007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
20-2897176

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AKERMAN, CAROLINA DMD
3610 YACHT CLUB DR
904
AVENTURA, FL 33180

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME AKERMAN, CAROLINA DMD
STREET ADDRESS 3610 YACHT CLUB DR
CITY-ST-ZIP AVENTURA, FL 33180 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carolina Akerman CAROLINA AKERMAN

4/11/07 (3ar) 4395424

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

40056875
#P05000067277Form **1120S**Department of the Treasury
Internal Revenue Service

U.S. Income Tax Return for an S Corporation

Do not file this form unless the corporation has filed Form 2553
to elect to be an S corporation.
See separate instructions.

OMB No. 1545-0130

2006

| | |
|---|--|
| For calendar year 2006 or tax year beginning , 2006, ending | |
| A Effective date of Selection 5/06/2005 | Use the IRS label. Otherwise, print or type. CAROLINA AKERMAN DMD P.A. 20533 BISCAYNE BLVD #293 AVENTURA, FL 33180 |
| B Business activity code number (see instructions) 621210 | C Employer identification number 20-2897176 |
| | D Date incorporated 5/06/2005 |
| | E Total assets (see instructions) \$ 100. |
| F Check if: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change (5) <input type="checkbox"/> Amended return | |
| G Enter the number of shareholders in the corporation at the end of the tax year 1 | |
| H Check if Schedule M-3 is required (attach Schedule M-3) <input type="checkbox"/> | |

Caution. Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

| | | | | |
|---|--|-------------------------------|-------|-------|
| INCOME | 1a Gross receipts or sales | b Less returns and allowances | c Bal | 1c |
| | 2 Cost of goods sold (Schedule A, line 8) | | | 2 |
| | 3 Gross profit. Subtract line 2 from line 1c | | | 3 |
| | 4 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797) | | | 4 |
| | 5 Other income (loss) (attach statement) | | | 5 |
| | 6 Total income (loss). Add lines 3 through 5 | | | 6 |
| DEDUCTIONS | 7 Compensation of officers | | | 7 |
| | 8 Salaries and wages (less employment credits) | | | 8 |
| | 9 Repairs and maintenance | | | 9 |
| | 10 Bad debts | | | 10 |
| | 11 Rents | | | 11 |
| | 12 Taxes and licenses | | | 12 |
| | 13 Interest | | | 13 |
| | 14 Depreciation not claimed on Schedule A or elsewhere on return (attach Form 4562) | | | 14 |
| | 15 Depletion (Do not deduct oil and gas depletion.) | | | 15 |
| | 16 Advertising | | | 16 |
| | 17 Pension, profit-sharing, etc, plans | | | 17 |
| | 18 Employee benefit programs | | | 18 |
| | 19 Other deductions (attach statement) | | | 19 |
| | 20 Total deductions. Add lines 7 through 19 | | | 20 |
| | 21 Ordinary business income (loss). Subtract line 20 from line 6 | | | 21 |
| TAX AND PAYMENTS | 22a Excess net passive income or LIFO recapture tax (see instructions) | 22a | | |
| | b Tax from Schedule D (Form 1120S) | 22b | | |
| | c Add lines 22a and 22b (see instructions for additional taxes) | | | 22c |
| | 23a 2006 estimated tax payments and 2005 overpayment credited to 2006 | 23a | | |
| | b Tax deposited with Form 7004 | 23b | | |
| | c Credit for federal tax paid on fuels (attach Form 4136) | 23c | | |
| | d Credit for federal telephone excise tax paid (attach Form 8913) | 23d | | |
| | e Add lines 23a through 23d | | | 23e |
| | 24 Estimated tax penalty (see instructions). Check if Form 2220 is attached | | | 24 |
| | 25 Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed | | | 25 0. |
| 26 Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid | | | 26 | |
| 27 Enter amount from line 26 Credited to 2007 estimated tax | | Refunded | 27 | |

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer

Date

Title

May the IRS discuss this return with the preparer shown below (see instructions)?

☒ Yes ☐ No

| | | | |
|---------------------------------|--|--------------------------|------------------------|
| Preparer's signature | Date | Check if self-employed | Preparer's SSN or PTIN |
| <i>San Topping</i> | 4/31/07 | <input type="checkbox"/> | P00605799 |
| Paid Preparer's Use Only | Firm's name (or yours if self-employed), address, and ZIP code | EIN | Phone no. |
| | TOPPING, KESSLER & COMPANY 4020 SHERIDAN ST. HOLLYWOOD, FL 33021 | 65-0517158 | (954) 983-5800 |

ATTACHMENT

40056875

Form 1120S (2006)

CAROLINA AKERMAN DMD P.A.

20-2897176

#005000062777

Page 2

Schedule A Cost of Goods Sold (see instructions)

| | | | |
|---|--|---|--|
| 1 | Inventory at beginning of year | 1 | |
| 2 | Purchases | 2 | |
| 3 | Cost of labor | 3 | |
| 4 | Additional section 263A costs (attach statement) | 4 | |
| 5 | Other costs (attach statement) | 5 | |
| 6 | Total. Add lines 1 through 5 | 6 | |
| 7 | Inventory at end of year | 7 | |
| 8 | Cost of goods sold. Subtract line 7 from line 6. Enter here and on page 1, line 2. | 8 | |

9a Check all methods used for valuing closing inventory:

- (i) ☐ Cost as described in Regulations section 1.471-3
 (ii) ☐ Lower of cost or market as described in Regulations section 1.471-4
 (iii) ☐ Other (Specify method used and attach explanation.)

b Check if there was a writedown of subnormal goods as described in Regulations section 1.471-2(c). ☐ Yes ☐ No**c** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970). ☐ Yes ☐ No**d** If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO. **9d** ☐ Yes ☐ No**e** If property is produced or acquired for resale, do the rules of section 263A apply to the corporation? ☐ Yes ☐ No**f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If 'Yes,' attach explanation. ☐ Yes ☐ No**Schedule B Other Information** (see instructions)

| | Yes | No |
|---|-----|----|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |

Note: If the corporation, at any time during the tax year, had assets or operated a business in a foreign country or U.S. possession, it may be required to attach **Schedule N (Form 1120)**, Foreign Operations of U.S. Corporations, to this return. See Schedule N for details.

Schedule K Shareholders' Pro Rata Share Items

| | Total amount |
|----|--------------|
| 1 | 1 |
| 2 | 2 |
| 3a | 3a |
| 3b | 3b |
| 3c | 3c |
| 4 | 4 |
| 5a | 5a |
| 5b | 5b |
| 6 | 6 |
| 7 | 7 |
| 8a | 8a |
| 8b | 8b |
| 8c | 8c |
| 9 | 9 |
| 10 | 10 |

ATTACHMENT 40056875

Form 1120S (2006) CAROLINA AKERMAN DMD P.A. 20-2897176 #P2502006 12 77 Page 3

| Shareholders' Pro Rata Share Items (continued) | | Total amount | |
|---|---|--------------|--|
| Deductions | 11 Section 179 deduction (attach Form 4562) | 11 | |
| | 12a Contributions | 12a | |
| | b Investment interest expense | 12b | |
| | c Section 59(e)(2) expenditures (1) Type <u>A</u> (2) Amount <u> </u> | 12c (2) | |
| | d Other deductions (see instructions) ... Type <u> </u> | 12d | |
| Credits | 13a Low-income housing credit (section 42(j)(5)) | 13a | |
| | b Low-income housing credit (other) | 13b | |
| | c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468) | 13c | |
| | d Other rental real estate credits (see instrs) Type <u> </u> | 13d | |
| | e Other rental credits (see instrs) Type <u> </u> | 13e | |
| | f Credit for alcohol used as fuel (attach Form 6478) | 13f | |
| | g Other credits (see instructions) ... Type <u> </u> | 13g | |
| Foreign Transactions | 14a Name of country or U.S. possession <u> </u> | | |
| | b Gross income from all sources | 14b | |
| | c Gross income sourced at shareholder level | 14c | |
| | Foreign gross income sourced at corporate level | | |
| | d Passive | 14d | |
| | e Listed categories (attach statement) | 14e | |
| | f General limitation | 14f | |
| | Deductions allocated and apportioned at shareholder level | | |
| | g Interest expense | 14g | |
| | h Other | 14h | |
| | Deductions allocated and apportioned at corporate level to foreign source income | | |
| | i Passive | 14i | |
| | j Listed categories (attach statement) | 14j | |
| | k General limitation | 14k | |
| Other information | | | |
| l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued | 14l | | |
| m Reduction in taxes available for credit (attach statement) | 14m | | |
| n Other foreign tax information (attach statement) | | | |
| Alternative Minimum Tax (AMT) Items | 15a Post-1986 depreciation adjustment | 15a | |
| | b Adjusted gain or loss | 15b | |
| | c Depletion (other than oil and gas) | 15c | |
| | d Oil, gas, and geothermal properties — gross income | 15d | |
| | e Oil, gas, and geothermal properties — deductions | 15e | |
| | f Other AMT items (attach statement) | 15f | |
| Items Affecting Shareholder Basis | 16a Tax-exempt interest income | 16a | |
| | b Other tax-exempt income | 16b | |
| | c Nondeductible expenses | 16c | |
| | d Property distributions | 16d | |
| | e Repayment of loans from shareholders | 16e | |
| Other Information | 17a Investment income | 17a | |
| | b Investment expenses | 17b | |
| | c Dividend distributions paid from accumulated earnings and profits | 17c | |
| | d Other items and amounts (attach statement) | | |
| Reconciliation | 18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and lines 14l ... | 18 | |

ATTACHMENT 40056875

Form 1120S (2006) CAROLINA AKERMAN DMD P.A.

20-2897176

#P05000067277

Page 4

Schedule L Balance Sheets per Books

| | Beginning of tax year | | End of tax year | |
|--|-----------------------|------|-----------------|------|
| | (a) | (b) | (c) | (d) |
| Assets | | | | |
| 1 Cash | | | | |
| 2a Trade notes and accounts receivable | | | | |
| b Less allowance for bad debts | | | | |
| 3 Inventories | | | | |
| 4 U.S. government obligations | | | | |
| 5 Tax-exempt securities (see instructions) | | | | |
| 6 Other current assets (attach stmt) ... SEE ST. 1 | | 100. | | 100. |
| 7 Loans to shareholders | | | | |
| 8 Mortgage and real estate loans | | | | |
| 9 Other investments (attach statement) | | | | |
| 10a Buildings and other depreciable assets | 4,486. | | 4,486. | |
| b Less accumulated depreciation | 4,486. | | 4,486. | |
| 11a Depletable assets | | | | |
| b Less accumulated depletion | | | | |
| 12 Land (net of any amortization) | | | | |
| 13a Intangible assets (amortizable only) | | | | |
| b Less accumulated amortization | | | | |
| 14 Other assets (attach stmt) | | | | |
| 15 Total assets | | 100. | | 100. |
| Liabilities and Shareholders' Equity | | | | |
| 16 Accounts payable | | | | |
| 17 Mortgages, notes, bonds payable in less than 1 year | | | | |
| 18 Other current liabilities (attach stmt) | | | | |
| 19 Loans from shareholders | | | | |
| 20 Mortgages, notes, bonds payable in 1 year or more | | | | |
| 21 Other liabilities (attach statement) | | | | |
| 22 Capital stock | | 100. | | 100. |
| 23 Additional paid-in capital | | | | |
| 24 Retained earnings | | | | |
| 25 Adjustments to shareholders' equity (att stmt) | | | | |
| 26 Less cost of treasury stock | | | | |
| 27 Total liabilities and shareholders' equity | | 100. | | 100. |

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note: Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more — see instructions

| | | | |
|---|----|--|----|
| 1 Net income (loss) per books | 0. | 5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): | |
| 2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize): | | a Tax-exempt interest. \$ | |
| 3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12, and 14i (itemize): | | 6 Deductions included on Schedule K, lines 1 through 12, and 14i, not charged against book income this year (itemize): | |
| a Depreciation. \$ | | a Depreciation ... \$ | |
| b Travel and entertainment. \$ | | 7 Add lines 5 and 6 | 0. |
| 4 Add lines 1 through 3 | 0. | 8 Income (loss) (Schedule K, ln 18). Ln 4 less ln 7 ... | 0. |

Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)

| | (a) Accumulated adjustments account | (b) Other adjustments account | (c) Shareholders' undistributed taxable income previously taxed |
|---|-------------------------------------|-------------------------------|---|
| 1 Balance at beginning of tax year | 0. | | |
| 2 Ordinary income from page 1, line 21 | | | |
| 3 Other additions | | | |
| 4 Loss from page 1, line 21 | | | |
| 5 Other reductions | | | |
| 6 Combine lines 1 through 5 | | | |
| 7 Distributions other than dividend distributions | | | |
| 8 Balance at end of tax year. Subtract line 7 from line 6 | 0. | | |

ATTACHMENT 40056875

Schedule K-1 (Form 1120S) 2006 CAROLINA AKERMAN DMD P.A. #P2500006 727720-2897176

Page 2

This list identifies the codes used on Schedule K-1 for all shareholders and provides summarized reporting information for shareholders who file Form 1040. For detailed reporting and filing information, see the separate Shareholder's Instructions for Schedule K-1 and the instructions for your income tax return.

- 1 Ordinary business income (loss).** You must first determine whether the income (loss) is passive or nonpassive. Then enter on your return as follows:

| | <i>Report on</i> |
|-------------------|------------------------------------|
| Passive loss | See the Shareholder's Instructions |
| Passive income | Schedule E, line 28, column (g) |
| Nonpassive loss | Schedule E, line 28, column (h) |
| Nonpassive income | Schedule E, line 28, column (i) |

- 2 Net rental real estate income (loss)** See the Shareholder's Instructions

- 3 Other net rental income (loss)**
- | | |
|------------|------------------------------------|
| Net income | Schedule E, line 28, column (g) |
| Net loss | See the Shareholder's Instructions |

- 4 Interest income** Form 1040, line 8a

- 5a Ordinary dividends** Form 1040, line 9a

- 5b Qualified dividends** Form 1040, line 9b

- 6 Royalties** Schedule E, line 4

- 7 Net short-term capital gain (loss)** Schedule D, line 5, column (f)

- 8a Net long-term capital gain (loss)** Schedule D, line 12, column (f)

- 8b Collectibles (28%) gain (loss)** 28% Rate Gain Worksheet, line 4 (Schedule D instructions)

- 8c Unrecaptured section 1250 gain** See the Shareholder's Instructions

- 9 Net section 1231 gain (loss)** See the Shareholder's Instructions

- 10 Other income (loss)**
- | <i>Code</i> | |
|--|------------------------------------|
| A Other portfolio income (loss) | See the Shareholder's Instructions |
| B Involuntary conversions | See the Shareholder's Instructions |
| C Section 1256 contracts and straddles | Form 6781, line 1 |
| D Mining exploration costs recapture | See Pub 535 |
| E Other income (loss) | See the Shareholder's Instructions |

- 11 Section 179 deduction** See the Shareholder's Instructions

- 12 Other deductions**

| | |
|---|------------------------------------|
| A Cash contributions (50%) | See the Shareholder's Instructions |
| B Cash contributions (30%) | |
| C Noncash contributions (50%) | |
| D Noncash contributions (30%) | |
| E Capital gain property to a 50% organization (30%) | |
| F Capital gain property (20%) | |
| G Investment interest expense | Form 4952, line 1 |
| H Deductions — royalty income | Schedule E, line 18 |
| I Section 59(e)(2) expenditures | See the Shareholder's Instructions |
| J Deductions — portfolio (2% floor) | Schedule A, line 22 |
| K Deductions — portfolio (other) | Schedule A, line 27 |
| L Preproductive period expenses | See the Shareholder's Instructions |

- M Commercial revitalization deduction from rental real estate activities** See Form 8582 Instructions

- N Reforestation expense deduction** See the Shareholder's Instructions

- O Domestic production activities information** See Form 8903 Instructions

- P Qualified production activities income** Form 8903, line 7

- Q Employer's W-2 wages** Form 8903, line 13

- R Other deductions** See the Shareholder's Instructions

- 13 Credits**

| | |
|--|------------------------------------|
| A Low-income housing credit (section 42(j)(5)) | See the Shareholder's Instructions |
| B Low-income housing credit (other) | |
| C Qualified rehabilitation expenditures (rental real estate) | |
| D Other rental real estate credits | |
| E Other rental credits | |
| F Undistributed capital gains credit | Form 1040, line 70, check box a |
| G Credit for alcohol used as fuel | See the Shareholder's Instructions |
| H Work opportunity credit | |
| I Welfare-to-work credit | |
| J Disabled access credit | |
| K Empowerment zone and renewal community employment credit | Form 8844, line 3 |

| <i>Code</i> | <i>Report on</i> |
|--|------------------------------------|
| L Credit for increasing research activities | See the Shareholder's Instructions |
| M New markets credit | |
| N Credit for employer social security and Medicare taxes | |
| O Backup withholding | |
| P Other credits | Form 1040, line 64 |

- 14 Foreign transactions**
- | | |
|---|-------------------|
| A Name of country or U.S. possession | Form 1116, Part I |
| B Gross income from all sources | |
| C Gross income sourced at shareholder level | |

Foreign gross income sourced at corporate level

| | |
|----------------------|-------------------|
| D Passive | Form 1116, Part I |
| E Listed categories | |
| F General limitation | |

Deductions allocated and apportioned at shareholder level

| | |
|--------------------|-------------------|
| G Interest expense | Form 1116, Part I |
| H Other | Form 1116, Part I |

Deductions allocated and apportioned at corporate level to foreign source income

| | |
|----------------------|-------------------|
| I Passive | Form 1116, Part I |
| J Listed categories | |
| K General limitation | |

Other information

| | |
|---|------------------------------------|
| L Total foreign taxes paid | Form 1116, Part II |
| M Total foreign taxes accrued | Form 1116, Part II |
| N Reduction in taxes available for credit | Form 1116, line 12 |
| O Foreign trading gross receipts | Form 8873 |
| P Extraterritorial income exclusion | Form 8873 |
| Q Other foreign transactions | See the Shareholder's Instructions |

- 15 Alternative minimum tax (AMT) items**
- | | |
|---|---|
| A Post-1986 depreciation adjustment | See the Shareholder's Instructions and the Instructions for Form 6251 |
| B Adjusted gain or loss | |
| C Depletion (other than oil & gas) | |
| D Oil, gas, & geothermal — gross income | |
| E Oil, gas, & geothermal — deductions | |
| F Other AMT items | |

- 16 Items affecting shareholder basis**
- | | |
|--|------------------------------------|
| A Tax-exempt interest income | Form 1040, line 8b |
| B Other tax-exempt income | See the Shareholder's Instructions |
| C Nondeductible expenses | |
| D Property distributions | |
| E Repayment of loans from shareholders | |

- 17 Other information**
- | | |
|---|------------------------------------|
| A Investment income | Form 4952, line 4a |
| B Investment expenses | Form 4952, line 5 |
| C Qualified rehabilitation expenditures (other than rental real estate) | See the Shareholder's Instructions |
| D Basis of energy property | See the Shareholder's Instructions |
| E Recapture of low-income housing credit (section 42(j)(5)) | Form 8611, line 8 |
| F Recapture of low-income housing credit (other) | Form 8611, line 8 |
| G Recapture of investment credit | See Form 4255 |
| H Recapture of other credits | See the Shareholder's Instructions |
| I Look-back interest — completed long-term contracts | See Form 8697 |
| J Look-back interest — income forecast method | See Form 8866 |
| K Dispositions of property with section 179 deductions | See the Shareholder's Instructions |
| L Recapture of section 179 deduction | |
| M Section 453(f)(3) information | |
| N Section 453A(c) information | |
| O Section 1260(b) information | |
| P Interest allocable to production expenditures | |
| Q CCF nonqualified withdrawals | |
| R Information needed to figure depletion — oil and gas | |
| S Amortization of reforestation costs | |
| T Other information | |

ATTACHMENT 45056875...

2006

FEDERAL STATEMENTS #05000067277 PAGE 1

CAROLINA AKERMAN DMD P.A.

20-2897176

STATEMENT 1
FORM 1120S, SCHEDULE L, LINE 6
OTHER CURRENT ASSETS

| | <u>BEGINNING</u> | <u>ENDING</u> |
|------------------------------------|------------------|----------------|
| STOCK SUBSCRIPTION RECEIVABLE..... | \$ 100. | \$ 100. |
| TOTAL | <u>\$ 100.</u> | <u>\$ 100.</u> |