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SUNSET AMBULATORY SURGICAL CENTER & Schlomo Schmucl

Exhibit #	Document	File Date
1	The People of the State of California v. Schlomo Schmucl	1/4/2019
2	Criminal Case Summary: #BA474077-01 Schlomo Schmucl	
3	CA Secretary of State (SOS) Articles of Incorporation Sunset Ambulatory Surgery Center	10/30/1998
4	SOS Statement by Domestic Stock Corporation Sunset Ambulatory Surgery Center	6/25/1999
5	SOS Statement of Information Sunset Ambulatory Surgery Center	8/28/2017

EXHIBIT 1

WARRANT ISSUED

HEALTHCARE FRAUD

SUPERIOR COURT OF THE STATE OF CALIFORNIA FOR THE COUNTY OF LOS ANGELES

THE PEOPLE OF THE STATE OF CALIFORNIA, Plaintiff, EDP REPORT ON FILE 01 SCHLOMO SCHMUEL (DOB: 09/13/1965) Defendant(s).
--

CASE NO. BA474077

FELONY COMPLAINT
FOR ARREST WARRANT

LOS ANGELES SUPERIOR COURT
 2019 JAN -4 PM 2:00
 FILED

The undersigned is informed and believes that:

COUNT 1

On or between April 13, 2012 and June 23, 2012, in the County of Los Angeles, the crime of INSURANCE FRAUD, in violation of PENAL CODE SECTION 550(a)(6), a Felony, was committed by SCHLOMO SCHMUEL, who did aid, abet, solicit, conspire with another and did knowingly make and cause to be made a false and fraudulent claim for payment of a health care benefit.

It is further alleged that the claim or amount at issue exceeds nine hundred fifty dollars (\$950).

It is further alleged ,offenses described in Penal Code section 803(c),that the above violation was not discovered until January 21, 2015 by Clarissa Jimenez by notification, and that no victim of said violation and no law enforcement agency chargeable with the investigation and prosecution of said violation had actual and constructive knowledge of said violation prior to said date because fraud unpracticed unknown, within the meaning of Penal Code section 803(c).

* * * * *

COUNT 2

On or between January 31, 2013 and June 20, 2015, in the County of Los Angeles, the crime of PARTICIPATING IN PATIENT REFERRAL REBATES WHEN LICENSED IN THE HEALING ARTS OR AS A CHIROPRACTOR, in violation of BUSINESS AND PROFESSIONS CODE SECTION 650, a Felony, was committed by SCHLOMO SCHMUEL, who was licensed under Division 2 of the Health and Safety Code , and offered, delivered, received, and/or accepted a commission as compensation or inducement for referring patients, clients, or customers to another person.

It is further alleged that in the commission of the above offense(s) the said defendant(s), SCHLOMO SCHMUEL, with the intent to do so, took, damaged, and destroyed property of a value exceeding \$200,000, within the meaning of Penal Code section 12022.6(a)(2).

* * * * *

Schmuel Zamora allegation

It is further alleged as to Count 1, that victim, State Compensation Insurance Fund (SCIF), did not discover, and could not reasonably have discovered the offense set forth herein before January 5, 2015 within the meaning of Penal Code section 803(c):

In January of 2015, Detective Clarissa Jimenez alerted multiple insurance carriers of fraud in billing practices by Schlomo Schmuel. Schmuel operated two companies that dispensed durable medical equipment for rental or sale. Those companies were Innovative Orthopedic Solutions and Diamond Orthopedic Services.

On January 5, 2015, SCIF employee, Yvette Kyle reviewed their records. Kyle contacted a claimant, Michal Gilbert, who was to receive rented medical equipment from Innovative. Gilbert indicated she did not receive any equipment. SCIF was billed by Innovative four times for rentals of the equipment from April 3, 2012-June 23, 2012. The total cost to SCIF was \$7,560.

On January 21, 2015, Detective Clarissa Jimenez was notified by Lane Spencer, a supervisor at SCIF, that they had recently discovered billing for services not rendered by Innovative Orthopedic Solutions (Innovative).

Victim State Insurance Compensation Fund did not, nor reasonably could have discovered the crimes until the fraudulent nature of Schmuel's billing practices were brought to their attention by Det. Jimenez.

NOTICE: Conviction of this offense will require the defendant to provide DNA samples and print impressions pursuant to Penal Code sections 296 and 296.1. Willful refusal to provide the samples and impressions is a crime.

NOTICE: The People of the State of California intend to present evidence and seek jury findings regarding all applicable circumstances in aggravation, pursuant to Penal Code section 1170(b) and *Cunningham v. California* (2007) 549 U.S. 270.

NOTICE: A Suspected Child Abuse Report (SCAR) may have been generated within the meaning of Penal Code §§ 11166 and 11168 involving the charges alleged in this complaint. Dissemination of a SCAR is limited by Penal Code §§ 11167 and 11167.5 and a court order is required for full disclosure of the contents of a SCAR.

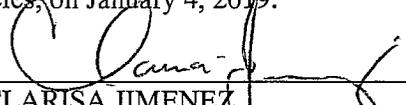
NOTICE: Any allegation making a defendant ineligible to serve a state prison sentence in the county jail shall not be subject to dismissal pursuant to Penal Code § 1385.

NOTICE: Conviction of this offense prohibits you from owning, purchasing, receiving, possessing, or having under your custody and control any firearms, and effective January 1, 2018, will require you to complete a Prohibited Persons Relinquishment Form ("PPR") pursuant to Penal Code § 29810.

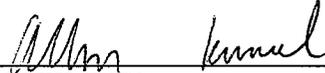
Further, attached hereto and incorporated herein are official reports and documents of a law enforcement agency which the undersigned believes establish probable cause for the arrest of defendant(s) SCHLOMO SCHMUEL for the above-listed crimes. Wherefore, a warrant of arrest is requested for SCHLOMO SCHMUEL.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT AND THAT THIS COMPLAINT, CASE NUMBER BA474077, CONSISTS OF 2 COUNT(S).

Executed at LOS ANGELES, County of Los Angeles, on January 4, 2019.


CLARISA JIMENEZ
DECLARANT AND COMPLAINANT

JACKIE LACEY, DISTRICT ATTORNEY

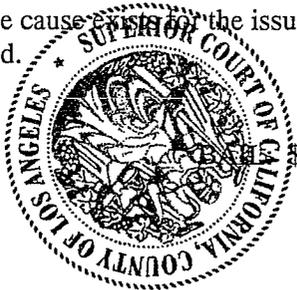
BY: 
ALLYSON KIMMEL
DEPUTY DISTRICT ATTORNEY
HEALTHCARE FRAUD DIVISION

AGENCY: CALIF DEPT OF INSURANCE I/O: CLARISSA JIMENEZ ID NO.: 448 PHONE: (714) 712-7604
DR NO.: 13CW013879 OPERATOR: HT PRELIM. TIME EST.: 4 HOUR(S)

<u>DEFENDANT</u>	<u>CH NO.</u>	<u>DOB</u>	<u>BOOKING NO.</u>	<u>BAIL RECOM'D</u>	<u>CUSTODY RTN DATE</u>
SCHMUEL, SCHLOMO	A09970050	9/13/1965		\$2,000,000	

It appearing to the Court that probable cause exists for the issuance of a warrant of arrest for the above-named defendant(s), the warrant is so ordered.

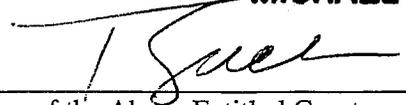
SCHLOMO SCHMUEL



145,000

MICHAEL TYNAN

DATE: 1/4/19


Judge of the Above Entitled Court

Pursuant to Penal Code Section 1054.5(b), the People are hereby informally requesting that defense counsel provide discovery to the People as required by Penal Code Section 1054.3.

FELONY COMPLAINT -- ORDER HOLDING TO ANSWER -- P.C. SECTION 872

It appearing to me from the evidence presented that the following offense(s) has/have been committed and that there is sufficient cause to believe that the following defendant(s) guilty thereof, to wit:

SCHLOMO SCHMUEL

<u>Ct.</u>	<u>Charge</u>	<u>Charge Range</u>	<u>Allegation</u>	<u>Alleg. Effect</u>
1	PC 550(a)(6)	2-3-5 County Jail	PC 803(c)	Check Code
2	BP 650	16,2,3 Jail+\$0-50,000	PC 12022.6(a)(2)	+2 Yrs.

I order that the defendant(s) be held to answer therefore and be admitted to bail in the sum of:

SCHLOMO SCHMUEL _____ Dollars

and be committed to the custody of the Sheriff of Los Angeles County until such bail is given. Date of arraignment in Superior Court will be:

SCHLOMO SCHMUEL _____ in Dept _____

at: _____ A.M.

Date: _____

Committing Magistrate

EXHIBIT 2

Case Number: LACBA474077-01
 Defendant Name: SCHMUEL, SCHLOMO
 Violation Date: April 13, 2012
 Filing Date: January 4, 2019
 Courthouse: Clara Shortridge Foltz Criminal Justice Center

CASE INFORMATION

Count	Charge Section	Charge Statute	Plea	Disposition	Disposition Date
01	550(A)(6)	Penal Code	Not Guilty	Case Pending	Case Pending
02	650	Business & Professions Code	Not Guilty	Case Pending	Case Pending

EVENTS

Upcoming Scheduled Events

Date	Time	Location	Dept/Room Number	
April 24, 2019	08:30 AM	Clara Shortridge Foltz Criminal Justice Center	050	PRELIM SETTING/RESETTING

Past Events

Date	Time	Location	Dept/Room Number	Events
January 4, 2019	08:30 AM	Clara Shortridge Foltz Criminal Justice Center	CLK	DOCKET LINE ENTRY
February 1, 2019	08:30 AM	Clara Shortridge Foltz Criminal Justice Center	030	ARRAIGNMENT
March 6, 2019	08:30 AM	Clara Shortridge Foltz Criminal Justice Center	050	EARLY DISPOSITION HEARING

BAIL

No Information Found

SENTENCING INFORMATION

THE INFORMATION PROVIDED ON THIS WEBSITE CONTAINS ONLY AN EXTRACTION FROM THE COURT RECORD. IT IS PROVIDED FOR INFORMATIONAL PURPOSES ONLY AND IS NOT A FULL AND COMPLETE RECORD OF COURT PROCEEDINGS.

No Information Found

Alex Padilla
California Secretary of State

Business Search - Entity Detail

The California Business Search is updated daily and reflects work processed through Tuesday, March 19, 2019. Please refer to document [Processing Times](#) for the received dates of filings currently being processed. The data provided is not a complete or certified record of an entity. Not all images are available online.

C2095910 SUNSET AMBULATORY SURGICAL CENTER

Registration Date:	10/30/1998
Jurisdiction:	CALIFORNIA
Entity Type:	DOMESTIC STOCK
Status:	ACTIVE
Agent for Service of Process:	SCHLOMO SCHMUEL 2707 SUNSET BLVD LOS ANGELES CA 90026
Entity Address:	2707 SUNSET BLVD LOS ANGELES CA 90026
Entity Mailing Address:	2707 SUNSET BLVD LOS ANGELES CA 90026

A Statement of Information is due EVERY year beginning five months before and through the end of October.

Document Type	↕	File Date	↕	PDF
SI-NO CHANGE		08/28/2017		
SI-COMPLETE		06/25/1999		
REGISTRATION		10/30/1998		

* Indicates the information is not contained in the California Secretary of State's database.

- If the status of the corporation is "Surrender," the agent for service of process is automatically revoked. Please refer to California Corporations Code [section 2114](#) for information relating to service upon corporations that have surrendered.
- For information on checking or reserving a name, refer to [Name Availability](#).
- If the image is not available online, for information on ordering a copy refer to [Information Requests](#).
- For information on ordering certificates, status reports, certified copies of documents and copies of documents not currently available in the Business Search or to request a more extensive search for records, refer to [Information Requests](#).
- For help with searching an entity name, refer to [Search Tips](#).
- For descriptions of the various fields and status types, refer to [Frequently Asked Questions](#).

EXHIBIT 3

2095910 Y

ARTICLES OF INCORPORATION

ARTICLE ONE

The name of this Corporation is

SUNSET AMBULATORY SURGICAL CENTER

ARTICLE TWO

The purpose of this corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

ARTICLE THREE

The name and address in this state of this Corporation's initial agent for service of process is:

SCHLOMO SCHMUEL
2707 Sunset Blvd.
Los Angeles, California 90026

ARTICLE FOUR

This Corporation is authorized to issue only one class of shares, which shall be designated "common" shares. The total number of such shares that may be issued is 10,000.

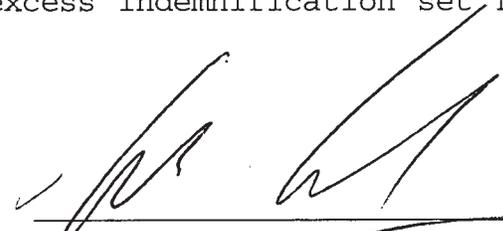
ARTICLE FIVE

The liability of the Directors of the Corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

ARTICLE SIX

The Corporation is authorized to provide indemnification of agents (as defined in Section 317 of the Corporations Code) for breach of duty to the Corporation and its stockholders through bylaw provisions or through agreements with the agents, or both, in excess of the indemnification otherwise permitted by Section 317 of the Corporations Code, subject to the limits of such excess indemnification set forth in Section 204 of the Corporations Code.

Dated: October 26, 1998


Schlomo Schmuël, Incorporator

FILED
In the office of the Secretary of State
of the State of California
OCT 30 1998
Bill Jones
BILL JONES, Secretary of State

EXHIBIT 4



State of California

Bill Jones

Secretary of State

P.O. Box 944230
Sacramento, CA 94244-2300
Phone: (916) 657-3537

99-309118

FILED
SACRAMENTO CALIF

STATEMENT BY DOMESTIC STOCK CORPORATION

THIS STATEMENT MUST BE FILED WITH CALIFORNIA SECRETARY OF STATE (SEC. 1502, CORPORATIONS CODE)

A \$10 FILING FEE MUST ACCOMPANY THIS STATEMENT

WHEN COMPLETING FORM, PLEASE USE BLACK TYPEWRITER RIBBON OR BLACK INK

IMPORTANT - Please Read Instructions On Back Of Form

JUN 25 '99

Bill Jones
SECRETARY OF STATE

99-309118
C 2095910

Added For Imaging
07-18-2017 Jmc

1. DUE DATE: JANUARY 30, 1999
SUNSET AMBULATORY SURGICAL CENTER

2095910

DO NOT ALTER PREPRINTED NAME IF ITEM NO. 1 IS BLANK, PLEASE ENTER CORPORATE NAME

DO NOT WRITE IN THIS SPACE

THE CALIFORNIA CORPORATION (AND FOREIGN) MUST SET THE FOLLOWING STATEMENTS

2. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 2707 Sunset Blvd	ROOM NO.	2A. CITY AND STATE Los Angeles CA	2B. ZIP CODE 90026
3. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA (IF ANY)	ROOM NO.	3A. CITY CA	3B. ZIP CODE
4. MAILING ADDRESS 2707 Sunset Blvd	ROOM NO.	4A. CITY AND STATE Los Angeles CA	4B. ZIP CODE 90026

THE NAMES OF THE FOLLOWING OFFICERS ARE:

5. CHIEF EXECUTIVE OFFICER Schlomo Schmuvel	5A. STREET ADDRESS (SEE REVERSE SIDE) 2707 Sunset Blvd	5B. CITY AND STATE LA CA	5C. ZIP CODE 90026
6. SECRETARY Schlomo Schmuvel	6A. STREET ADDRESS (SEE REVERSE SIDE) 2707 Sunset Blvd	6B. CITY AND STATE LA CA	6C. ZIP CODE 90026
7. CHIEF FINANCIAL OFFICER Schlomo Schmuvel	7A. STREET ADDRESS (SEE REVERSE SIDE) 2707 Sunset Blvd	7B. CITY AND STATE LA CA	7C. ZIP CODE 90026

DIRECTORS, INCLUDING DIRECTORS WHO ARE ALSO OFFICERS (Attach supplementary list if necessary)
Must have one or more directors (Class 3, Sec. 301a, Corporations Code). State with not listing directors will be rejected.

8. NAME Schlomo Schmuvel	8A. STREET ADDRESS (SEE REVERSE SIDE) 2707 Sunset Blvd	8B. CITY AND STATE LA CA	8C. ZIP CODE 90026
9. NAME Schlomo Schmuvel	9A. STREET ADDRESS (SEE REVERSE SIDE) 2707 Sunset Blvd	9B. CITY AND STATE LA CA	9C. ZIP CODE 90026
10. NAME Schlomo Schmuvel	10A. STREET ADDRESS (SEE REVERSE SIDE) 2707 Sunset Blvd	10B. CITY AND STATE LA CA	10C. ZIP CODE 90026

11. THE NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY: 0

DESIGNATED AGENT FOR SERVICE OF PROCESS (Only one agent may be named and must reside in California)

12. NAME Schlomo Schmuvel 2707 Sunset Blvd LA CA 90026
13. CALIFORNIA STREET ADDRESS IF AGENT IS AN INDIVIDUAL. DO NOT USE P.O. BOX; DO NOT INCLUDE ADDRESS IF AGENT IS A CORPORATION.

DESCRIBE TYPE OF BUSINESS OF THE CORPORATION NAMED IN ITEM 1.

14. TYPE OF BUSINESS Podiatry Surgical Center
15. DECLARE THAT I HAVE EXAMINED THIS STATEMENT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT AND COMPLETE

Schlomo Schmuvel
TYPE OR PRINT NAME OF SIGNING OFFICER OR AGENT
SIGNATURE
PRES. TITLE
1-30-99 DATE

EXHIBIT 5



State of California Secretary of State

S

Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

FQ67458

FILED

In the office of the Secretary of State
of the State of California

AUG-28 2017

1. CORPORATE NAME

SUNSET AMBULATORY SURGICAL CENTER

2. CALIFORNIA CORPORATE NUMBER

C2095910

This Space for Filing Use Only

No Change Statement (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to **Item 17**.

Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

Names and Complete Addresses of All Directors, Including Directors Who are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, **IF AN INDIVIDUAL** CITY STATE ZIP CODE

Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

08/28/2017 SCHLOMO SCHMUEL PRESIDENT
DATE TYPE/PRINT NAME OF PERSON COMPLETING FORM TITLE SIGNATURE