

F000000002034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JAN 24 AM 10:04

FILED

withdrawal

T BROWN JAN 27 2005

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LASER DIAGNOSTIC TECHNOLOGIES, INC.
(Name of corporation)

DOCUMENT NUMBER: F00000002034

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JONATHAN LEX H
(Name of Person)

LASER DIAGNOSTIC TECHNOLOGIES, INC.
(Firm/Company)

10864 Thornmint Rd.
(Address)

SAN DIEGO, CA 92127
(City/State and Zip code)

For further information concerning this matter, please call:

GINA CASARI

(Name of Person)

at

(858) 521-4819

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL. 32399

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

LASER DIAGNOSTIC TECHNOLOGIES, INC.
(Name of Corporation)

F0000000 2034
(Document Number of Corporation (if known))

CALIFORNIA
(Incorporated Under Laws of)

FILED
05 JAN 24 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

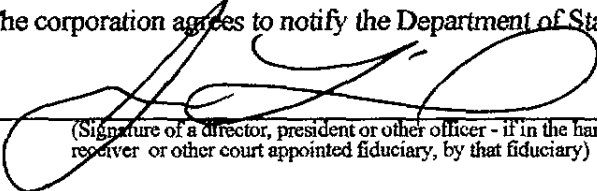
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

10864 THORNHUNT Rd
(Mailing Address)

SAN DIEGO, CA 92127
(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

1/18/05
(Date)

JONATHAN LEIGH
(Typed or printed name of person signing)

ASSISTANT CONTROLLER
(Title of person signing)

FILING FEE \$35