

F93000000425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

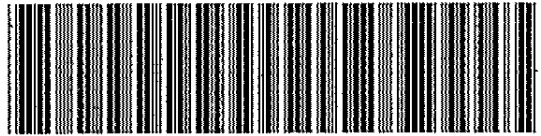
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 SEP - 1 PM 12:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA Resig.

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August 27, 2004

RE: CENTRON DPL COMPANY, INC. (MN. DOM.)  
FISONS INSTRUMENTS, INC. (MA. DOM.)  
N.A. TRISTAR CORPORATION (DE. DOM.)

Secretary of State  
Corporate Records Bureau  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporations. Also enclosed is 1 check in the amount of \$ 105.00 to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, w enclose a stamped self-address envolepe.

Very truly yours,

C T CORPORATION SYSTEM

*Theresa Alfieri (ld)*

Theresa Alfieri  
Senior Supervisor &  
Assistant Secretary

TA:ld  
Enclosure

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

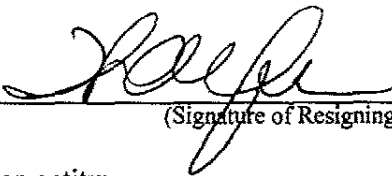
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, CT CORPORATION SYSTEM  
(Name of Registered Agent)  
N.A. TRISTAR CORPORATION (DE. DOM.)  
hereby resigns as Registered Agent for \_\_\_\_\_  
(Name of Corporation)

F93000000425  
(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which  
this statement is filed.

  
(Signature of Resigning Agent)

If signing on behalf of an entity:

CT CORPORATION SYSTEM - THERESA ALFIERI  
(Typed or Printed Name)

ASSISTANT SECRETARY  
(Capacity)

**Fee for filing this document:**

- \$87.50 - Active corporation
- \$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporation

**Make checks payable to Florida Department of State and mail to:**  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314