

STOP PAYMENT ORDER

TO: California National Bank 221 South Figueroa Street Suite 400 Los Angeles, CA 90012 "Financial Institution"		DATE RECEIVED 02/24/2003	TIME RECEIVED 04:10 PM
FROM: Michael S Laham Elana Laham 2 Enterprise Apt 8316 Aliso Viejo CA 92656 "You, Your or Customer"			
ACCOUNT NUMBER 69022473	CHECK NUMBER 1748	CHECK AMOUNT 1900.00	DATE OF CHECK 01/21/2003
PAYABLE TO: Robert Koretoff		REASON FOR STOPPING PAYMENT: Personal	
ORDER ENTERED BY: Lucy Medina	DATE ENTERED 02/24/2003	TIME ENTERED 04:10 PM	FEE \$ 15.00

CUSTOMER SIGNATURE _____ DATE 02/24/03

ORAL REQUEST Medina
TAKEN BY _____
Lucy Medina

STOP PAYMENT ORDER RELEASE	
This Stop Payment Order is released, withdrawn and cancelled.	
<input checked="" type="checkbox"/> CUSTOMER SIGNATURE _____	DATE _____

2/03 Rent Check Landlord
made it get lost.

[6 mos 8/24/03 STOP PAYMENT EXPIRES]

You have authorized, directed and requested Financial Institution to stop payment on the check described on Page 1. You agree to indemnify and hold the Financial Institution harmless from any and all claims, liabilities, costs and expenses, including but not limited to, court costs and reasonable attorney fees, resulting from or growing out of the Financial Institution's refusal to pay the check described on Page 1. Financial Institution shall have no liability to You for the payment of the identified check contrary to this stop payment order if the indicated check number, dollar amount or account number is not accurate. Financial Institution is not liable to You if it pays the identified check if Financial Institution acted in good faith or exercised ordinary care. Any damages that You incur and which the Financial Institution may be liable for are limited to actual damages not to exceed the amount of the check. You understand that if the stop payment order comes too late for the Financial Institution to have a reasonable time to act on it prior to accepting, certifying, paying, settling for, posting or becoming accountable for the check described on Page 1, that this stop payment order shall be of no effect. You agree that the Financial Institution may charge You the fee indicated for processing this stop payment order as well as a similar fee for each renewal You make, such fee to be deducted from Your account. This stop payment order shall be governed by the provisions of the Uniform Commercial Code in effect in the state in which Financial Institution is located. This stop payment order shall be valid for a period of twelve (12) months from the date it is made if signed by You unless Financial Institution has received a written revocation or renewal prior to expiration of such period.