

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 255680 (1)
 1. Corporation Name
SYMETRICS INDUSTRIES, INC.



Principal Place of Business
1015 W. NASA BLVD.
MELBOURNE FL 32901
305

Mailing Address
1015 W. NASA BLVD.
MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 305 North Drive Suite, Apt. #, etc.		2a. Mailing Address 26 305 North Drive Suite, Apt. #, etc.		3. Date Incorporated or Qualified 02/05/1962	
22 City & State 23 Melbourne, FL		27 City & State 28 Melbourne, FL		4. FEI Number 59-0954868	
24 Zip 32934		25 Country USA		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
29 Zip 32934		30 Country USA		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent GARNER, DUDLEY E., JR. 1015 W. NASA BLVD. MELBOURNE FL 32901				10. Name and Address of New Registered Agent 81 Name Anton Szpendyk 82 Street Address (P.O. Box Number is Not Acceptable) 305 CHRISSA Drive 83 City Melbourne 84 City Satellite Beach FL 85 Zip Code 32934			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Anton Szpendyk DATE 4-30-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PCT	☐ DELETE	1.1 TITLE	DS	☐ Change ☒ Addition		
NAME	GARNER, DUDLEY E.		1.2 NAME	Daniel Borislav			
STREET ADDRESS	1361 MEADOWBROOK RD.		1.3 STREET ADDRESS	6805 Route 202			
CITY-ST-ZIP	PALM BAY FL 32905		1.4 CITY-ST-ZIP	New Hope, PA 18938			
TITLE	DS	☒ DELETE	2.1 TITLE	D	☐ Change ☒ Addition		
NAME	BEACH, JANE J.		2.2 NAME	Emmanuel J. DeMaio			
STREET ADDRESS	3850 WOODLAKE CIRCLE APT 179		2.3 STREET ADDRESS	6805 Route 202			
CITY-ST-ZIP	PALM HARBOR FL 34684		2.4 CITY-ST-ZIP	New Hope, PA 18938			
TITLE	D	☒ DELETE	3.1 TITLE	D	☐ Change ☒ Addition		
NAME	CLAIRE, EARL		3.2 NAME	Gary W. Mavila			
STREET ADDRESS	P O BOX 2144 N/A		3.3 STREET ADDRESS	6805 Route 202			
CITY-ST-ZIP	AUGUSTA GA 30903		3.4 CITY-ST-ZIP	New Hope, PA 18938			
TITLE	V	☒ DELETE	4.1 TITLE	D	☐ Change ☒ Addition		
NAME	SINCLAIR, JERRY L.		4.2 NAME	George Farley			
STREET ADDRESS	410 RIO CASA DRIVE S.		4.3 STREET ADDRESS	6805 Route 202			
CITY-ST-ZIP	INDIANTLANTIC FL 32903		4.4 CITY-ST-ZIP	New Hope, PA 18938			
TITLE	V	☐ DELETE	5.1 TITLE	D	☐ Change ☒ Addition		
NAME	SZPENDYK, ANTON		5.2 NAME	Harold Pinst			
STREET ADDRESS	185 CHRISSA DRIVE		5.3 STREET ADDRESS	6805 Route 202			
CITY-ST-ZIP	SATELLITE BEACH FL 32937		5.4 CITY-ST-ZIP	New Hope, PA 18938			
TITLE	D	☒ DELETE	6.1 TITLE	D	☐ Change ☒ Addition		
NAME	TERRY, MICHAEL E		6.2 NAME	Ronald R. Thomas			
STREET ADDRESS	410 E STRAWBRIDGE AVE.		6.3 STREET ADDRESS	6805 Route 202			
CITY-ST-ZIP	MELBOURNE FL 32901		6.4 CITY-ST-ZIP	New Hope, PA 18938			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Anton Szpendyk DATE: 4-30-98 (107) 253-0303

CR2E034 (10/97)