

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028810

FILED  
Mar 05, 2004  
Secretary of State

**Entity Name:** SYMMETRY ASSET MANAGEMENT, LLC

**Current Principal Place of Business:**

12372 ANTILLE DR.  
BOCA RATON, FL 33428

**New Principal Place of Business:**

16170 BRISTOL POINTE DRIVE  
DELRAY BEACH, FL 33446

**Current Mailing Address:**

12372 ANTILLE DR.  
BOCA RATON, FL 33428

**New Mailing Address:**

16170 BRISTOL POINTE DRIVE  
DELRAY BEACH, FL 33446

**FEI Number:** 20-0136560

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AUSTIN, SCOTT R  
515 N. FLAGLER DR., SUITE 600  
WEST PALM BEACH, FL 334014323 US

**Name and Address of New Registered Agent:**

SHEINKER, JACK  
16170 BRISTOL POINTE DRIVE  
DELRAY BEACH, FL 33446 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JACK SHEINKER

03/05/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: SHEINKER, JACK  
Address: 16170 BRISTOL POINTE DRIVE  
City-St-Zip: DELRAY BEACH, FL 33446 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JACK SHEINKER

MGRM

03/05/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date