2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000105690

Entity Name: SYMMETRIX, INC.

FILED Aug 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3898 JULINGTON CREEK ROAD 4203 CLOVE STREET JACKSONVILLE, FL 32223 MIDDLEBURG, FL 32068

Current Mailing Address: New Mailing Address:

3898 JULINGTON CREEK ROAD 4203 CLOVE STREET JACKSONVILLE, FL 32223 MIDDLEBURG, FL 32068

FEI Number: 20-3223660 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LINDEN, ERIC C
8024 HERLONG ROAD
4203 CLOVE STREET
JACKSONVILLE, FL 32210 US
MIDDLEBURG, FL 32068 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: 08/08/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 BLUE, ELIZABETH
 Name:
 BLUE, ELIZABETH

 Address:
 8024 HERLONG ROAD
 Address:
 4203 CLOVE STREET

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:
 MIDDLEBURG, FL 32068

Title: VSTD () Delete Title: VSTD (X) Change () Addition

 Name:
 LINDEN, ERIC C
 Name:
 LINDEN, ERIC C

 Address:
 8024 HERLONG ROAD
 Address:
 4203 CLOVE STREET

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:
 MIDDLEBURG, FL 32068

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIC LINDEN VSTD 08/08/2006