## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000012374

Entity Name: SYMMETRICAL RESOLIBOES

DELRAY BEACH, FL 33483

City-St-Zip:

FILED Apr 27, 2004 Secretary of State

Entity Name: SYMMETRICAL RESOURCES CORP. **Current Principal Place of Business: New Principal Place of Business:** 700 W HILLSBORO BLVD B-4 STE 201 DEERFIELD BEACH, FL 33441 **Current Mailing Address: New Mailing Address:** 700 W HILLSBORO BLVD B-4 STE 201 DEERFIELD BEACH, FL 33441 FEI Number: 65-0813795 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOLFF, JOSEPH 4095 N.W. 59TH ST COCONUT CREEK, FL 33073 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LIVEK, WILLIAM P Name: Name: 1519 SE 2ND ST. Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: Title: DVP Title: () Change () Addition () Delete Name: ENGEL, WILLIAM E Name: 902 SEASAGE DR Address: Address:

City-St-Zip:

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 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: WILLIAM E ENGEL DVP 04/27/2004