200	o UN	FDEM BUS	NES REP	RT	(B)	D1199
DOCU 1. Entity Nan		# A9800	0002499	ر ا		SECRETARY OF STATE DIVISION OF CORPORATIONS
SHIRLRON, LTD.				ټټ.	,	!
Principal Place of Business 951 FERN DRIVE DELRAY BEACH FL 33483			Mailing Address 951 FERN DRIVE DELRAY BEACH FL 33483			01 JAN 30 PM 3: 35
2. Principal Place of Business			3. Mailing Address			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE
City & State			City & State			4. FEI Number 65-0879827 Applied For Not Applied For
Žip	Zip Country		Zip Count		try	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent HALLIBURTON, RONALD 951 FERN DRIVE DELRAY BEACH FL 33483					Name	7. Name and Address of New Registered Agent
					Street Add	ddress (P.O. Box Number is Not Acceptable)
					City FL Zip Code	
8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
9. Capital Contributions \$20,000 10. Amount of Capital Contributions \$\frac{100}{100} \text{MAKE:CHECK_PAYABLE_TO_DEPT. OF STATE}						
as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.						
12.	GENERAL PARTNER INFORMATION					ADDRESS CHANGES ONLY
DOCUMENT # NAME /	P98000091856 TRON ENTERPRISES, INC. 951 FERN DRIVE DELRAY BEACH FL 33483			STREE	ET ADDRESS	1000036321718 -02/05/0101020001
STREET ADDRESS CITY-ST-ZIP				CITY-	ST-ZIP	*****857.50 *****\$\$7.50 21.51
DOCUMENT # NAME				STREE	T ADDRESS	21/7/10
STREET ADDRESS CITY-ST-ZIP				ÇITY-	ST-ZIP	by all
OCCUMENT / NAME STREET ADDRESS - STREET					ADDRESS	N, 2127 2.15
STREET ADDRESS CITY-ST-ZIP					ST-ZIP	11- Antimo City Miller
DOCUMENT # NAME				STREE	T ADDRESS	DI - MM 852-50
STREET ADDRESS CITY-ST-ZIP				CITY-	ST-ZIP	
DOCUMENT ≠ NAME				STREE	T ADDRESS	FF 457,50 AR
STHEÉT ADDRESS City-St-Zip		·		CITY-	ST-ZIP	400,00 lade fee
DOCUMENT # NAME				STREE	T ADDRESS	
STREET ADDRESS CITY-ST-ZIP			·		ST-ZIP	`
14. I hereby certify that the information emplied 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 report is true and accurate and that my signature shall have the samplegal effect as if made under oath; that I am a General Partner of the limited partnership the receiver or trustee empowered to execute this eport as equilibrium that I am a General Partner of the limited partnership to the receiver or trustee empowered to execute this eport as equilibrium to the receiver or trustee empowered to execute this eport as equilibrium to the receiver or trustee empowered to execute this eport as equilibrium to the receiver or trustee empowered to execute this eport as equilibrium to the receiver or trustee empowered to execute the receiver or trustee empowered to execute this eport as equilibrium to the receiver or trustee empowered to execute this execute the receiver or trustee empowered to execute the receiver or trustee empowered to execute the receiver or trustee empowered to execute this execute the receiver or trustee empowered to execute the receiver of the receiver or trustee empowered to execute the receiver of the receiver or trustee empowered to execute the receiver of the receiver or trustee empowered to execute the receiver of the receiver or trustee empowered to execute the receiver of the receiver or trustee empowered to execute the receiver of the receiver of the receiver of the receiver or trustee empowered to execute the receiver of the receiver						
SIGNATURE: X SGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Oate Objume Phone 4						



888-538-1000 TEL (561) 588-5200 FAX (561) 493-2999 PARTS FAX (561) 493-2990 www.benchmarkgames.com.

51 Hypoluxo Road Hypoluxo, FL 33462-4501

DECEMBER 27, 2000

REGISTRATION SECTION DIVISION OF CORPORATIONS PO BOX 6327 TALLAHASSEE, FL 32314-6327

DEAR SIR OR MADAM:

ENCLOSED PLEASE FIND "2000 UNIFORM BUSINESS REPORT (UBR)" FOR SHIRLRON, LTD.

WE ORIGINALLY FILED THIS RETURN ON 9/5/00, WITH A PAYMENT OF \$228.75 – OUR CHECK # 21172-WRITTEN ON BENCHMARK ENTERTAINMENT LC.

WE RECEIVED NOTICE FROM THE DIVISION OF CORPORATIONS, IN OCTOBER 2000, THAT THEY HAD NOT RECEIVED THE "2000 UNIFORM BUSINESS REPORT".

I CALLED THE DIVISION OF CORPORATIONS UPON RECEIPT OF THIS NOTIFICATION AND THEY EXPRESSED TO ME THAT THE REPORT AND THE CHECK WERE SENT BACK TO SHIRLRON, LTD.

SINCE THEN I HAVE BEEN WAITING FOR OUR REPORT AND CHECK TO RETURN. AFTER JUST FINISHING OUR BANK RECONCILIATION FOR THE MONTH OF NOVEMBER 2000, I HAVE FOUND THIS CHECK TO STILL BE OUTSTANDING.

TODAY, I AGAIN CALLED THE DIVISION OF CORPORATIONS TO FIND OUT THE STATUS OF THE SHIRLRON ACCOUNT. I SPOKE WITH MR. SHAWN LOGAN AND TOLD HIM WE STILL HAVE NOT RECEIVED THE RETURNED REPORT WITH OUR CHECK.

I WAS INSTRUCTED BY MR. LOGAN TO RE-FILE THE **COPY** OF THE REPORT I HAVE, WITH A NEW PAYMENT OF \$628.75, WHICH REPRESENTS OUR PAYMENT OF \$228.75 PLUS A LATE FEE OF \$400.00. I WAS TOLD EVEN THOUGH THIS IS A **COPY** OF THE BUSINESS REPORT THAT WE ARE FILING, IT WOULD BE ACCEPTABLE SINCE THE ORIGINAL IS NOW LOST IN THE MAIL.

Yours truly,

CATHLEEN BILARDELLO, CONTROLLER, BENCHMARK ENTERTAINMENT LC

RONALD HALLIBURTON, PRESIDENT, SHIRLRON, LTD.







