

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 SEP 29 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P24060 (6)
1. Corporation Name
MORMAX BEVERAGES CORP.

Principal Place of Business

ONE MERCER ROAD
NATICK MA 01760

Mailing Address

ONE MERCER ROAD
NATICK MA 01760

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		04/25/1989		02/16/1996	
22 City & State		27 City & State		4. FEI Number		Applied For	
23 Zip		28 Zip		04-3048592		Not Applicable	
24 Country		29 Country		5. Certificate of Status Desired		8.75 Additional Fee Required	
				6. Election Campaign Financing		5.00 May Be Added to Fees	
				Trust Fund Contribution			
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		XX Yes [] No	

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PRESIDENT/DIRECTOR
NAME	ZARKIN, HERBERT J.	1.2 NAME	JOHN J. NUGENT
STREET ADDRESS	ONE MERCER RD	1.3 STREET ADDRESS	ONE MERCER ROAD
CITY-ST-ZIP	NATICK MA	1.4 CITY-ST-ZIP	NATICK, MA 01760
TITLE	VSD	2.1 TITLE	TREASURER/DIRECTOR
NAME	FORWARD, FRANK	2.2 NAME	
STREET ADDRESS	ONE MERCER RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	NATICK MA	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	VICE PRESIDENT/DIRECTOR
NAME	BRENT, JOHN A	3.2 NAME	ARTHUR V. BROWN
STREET ADDRESS	ONE MERCER RD	3.3 STREET ADDRESS	ONE MERCER ROAD
CITY-ST-ZIP	NATICK MA	3.4 CITY-ST-ZIP	NATICK, MA 01760
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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:

FRANK D. FORWARD

FRANK D. FORWARD

09-24-97

(508) 651-7400

CR2E034 (4/97)