

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24060

Entity Name: MORMAX BEVERAGES CORP.**Current Principal Place of Business:**25 RESEARCH DRIVE
WESTBOROUGH, MA 01581**Current Mailing Address:**25 RESEARCH DRIVE
WESTBOROUGH, MA 01581**FEI Number:** 04-3048592**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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**Officer/Director Detail :**

Title	S
Name	FELDMAN, ARLENE C
Address	25 RESEARCH DRIVE
City-State-Zip:	WESTBOROUGH MA 01581

Title	D
Name	SEN, LAURA J
Address	25 RESEARCH DRIVE
City-State-Zip:	WESTBOROUGH MA 01581

Title	T
Name	BIRES, LISA M
Address	25 RESEARCH DRIVE
City-State-Zip:	WESTBOROUGH MA 01581

Title	P
Name	NEPPL, CHRISTINE M
Address	25 RESEARCH DRIVE
City-State-Zip:	WESTBOROUGH MA 01581

Title	VP
Name	SUGRUE, KRISTYN M
Address	25 RESEARCH DRIVE
City-State-Zip:	WESTBOROUGH MA 01581

Title	EVPD
Name	EDDY, ROBERT W
Address	25 RESEARCH DRIVE
City-State-Zip:	WESTBOROUGH MA 01581

Title	ASST. SECRETARY
Name	HANLEY, NANCY M
Address	25 RESEARCH DRIVE
City-State-Zip:	WESTBOROUGH MA 01581

I hereby 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 all other like empowered.

SIGNATURE: ARLENE C. FELDMAN**SECRETARY****04/06/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date