FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUM 1. Corporation I	Name	2 (3)				
WHISK	EY GRAM, INC.				D JARONIA DI DAN BIRNI BARRI BARRA 1811A 1811A	TIGU TEGA DIBN DIDN TIGU DIDN BARI ARBI
Principal Place o	of Business	Mailing Address				
2345 14TH AVE. P O BOX 340 VERO BEACH FL 32690 VERO BEACH FL 32961						
TENO DENO	112 02030	US				
					3. Date incorporated or Qualified 3a 01/21/1974	. Date of Last Report 06/02/1995
2. Principal Plac	e of Business	2a. Malling Address		.=	4. FEI Number	Applied For
	20th Street	26			59-1512374	Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23 Vero	Beach , Fl	28			Trust Fund Contribution	Added to Fees
Zip 22066	Country	Zip	Country		8. This corporation has liability for intang	
32966	25 US 9, Name and Address of Current	Registered Agent	<u>o </u>		Florida Statutes X Yes 10. Name and Address of New Regist	
	8, Italie and Address of Carterin	Titigistored Agent	81	Name	IO. Mains and Address of New Megist	ered Agent
WEST, JAMES H				Street A	West James H. ddress (P.O. Box Number is Not Acceptable)	#
2345 14TH AVE.				Olibel A	8075 - 20th Street	
vero b	EACH FL 32960		83			
			84	City		85 Zip Code
11. Pursuant to	the provisions of Sections 607 0502	and 607 1508. Florida Statutes, t	he above r	lamed cor	Vero Beach poration submits this statement for the purpose	FL 32966
or registered	d agent, or both, in the State of Florida, and accept the obligations of, Section	 Such change was authorized b 	y the corp	oration's b	poard of directors. Thereby accept the appointment	ent as registered agent. I am
SIGNATURE	and decopy the designation of econo					
S ₁	gnature, typed or printed name of registered agent a			it signature rac	<u>:</u>	ATE DIDECTORO IN 40
12.	OFFICERS AND PCE	DELETE	13. 1 1 THTLE		ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	MASSEY, GLENN R		1.2 NAME		D Massey, G lenn R	
STREET ADDRESS	11917 QUEENSBURY ST.		1.3 STREET	ADDRESS	11917 Queensbury St. Houston, Tx 77024	
CITY-ST-ZIP	HOUSTON TX 77024	E DE ETE	1.4 CH1Y - S	T- 20°		
TITLE NAME	VSTD West, James H	☐ DELETE	2 1 TITLE 2 2 NAME		Р/р	X Change Addition
STREET ADDRESS	1705 SAND DOLLAR WAY		23 STREET	AMMRESS	West, Ja m es H. 1705 Sanl Dollar Way	
CITY-ST-ZIP	VERO BEACH FL 32963		2 4 CITY - S		yero Beach, F1 32963	
TITLE	D	☐ DELFTE	3 1 TITLE		\$10	Change K Addition
NAME	MERCER, WILLIAM E.		3.2 NAME		Kelly S. McMakin	
STREET ADDRESS	2121 SAGE RD, STE 150 HOUSTON, TX 77056		3.3 STREET		1508 Cor a l Oak Lane	
CITY-ST-ZIP TITLE	D 100310N, 1X 77030	DELETE	34 CHTY-S	1-ZIP	Vero Beach, F1-32963	Change Addition
NAME	SOLOMON ODEN HOWELL		4 2 NAME			
STREET ADDRESS	2603 GRASSLAND DRIVE		4 3 STREET	ADDRESS		
CITY-ST-ZIP	LOUISVILLE FL		44 CITY-S	T-ZIP		
TITLE	DENICON CRAIC T	☐ DEFELE	5 1 TITLE		•	Change Addition
NAME STREET ADDRESS	BENSON, CRAIG T. 1929 ALLEN PARKWAY		5.2 NAME 5.3 STREET	Anneres		
CITY-ST-ZIP	HOUSTON TX		5.4 CITY - S	1		
TITLE	DC	☐ DELETE	6 1 TATLE			Change Addition
NAME	WILLIAMS, ANDREW		6.2 NAME			
STREET ADDRESS	176 OCEAN WAY		6 3 STREET			
CHY-ST-ZIP	VERO BEACH FL 32967 certify that the information supplied w	ith this filing is voluntarily furnisher	640IIY-S d and does		fy for the exemption stated in Section 119.07(3)	k), Florida Statutes. I further
14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 earlit; 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 13 if changed, or or an attachment with an address.						
SIGNATURE: KELLY S. McMAKIN //6/96 (407)563-0263						

1/16/96 (407)563-0263