2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# P04000148223

Entity Name: MCII CARDS, INC.

Current Principal Place of Business:

2424 N. FEDERAL HWY., SUITE 418
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2424 N. FEDERAL HWY., SUITE 418
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 75-3117773 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POLLOCK, KENNETH S
2424 N. FEDERAL HWY., SUITE 418
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

DE MEO, ANTHONY
2424 N. FEDERAL HWY., SUITE 418
BOCA RATON, FL 33431 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: ANTHONY DE MEO 04/24/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: DE MEO, ANTHONY
Address: 2424 N. FEDERAL HIGHWAY, SUITE 418
City-St-Zip: BOCA RATON, FL 33431

Title: V/D ( ) Delete
Name: HEISE, ROBERT F
Address: 2424 N. FEDERAL HIGHWAY, SUITE 418
City-St-Zip: BOCA RATON, FL 33431

Title: S/D ( ) Delete
Name: POLLOCK, KENNETH S
Address: 2424 N. FEDERAL HIGHWAY, SUITE 418
City-St-Zip: BOCA RATON, FL 33431

Title: V ( ) Delete
Name: MAGLIONE, CARA
Address: 2424 N. FEDERAL HIGHWAY, SUITE 418
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: MAGLIONE, CARA
Address: 2424 N. FEDERAL HIGHWAY, SUITE 418
City-St-Zip: BOCA RATON, FL 33431

Title: V (X) Change ( ) Addition
Name: YOUNG, ROBERTA
Address: 2424 N. FEDERAL HIGHWAY, SUITE 418
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ANTHONY DE MEO P 04/24/2006
Electronic Signature of Signing Officer or Director Date