2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000014013

1. Entity Name

MBA CARD-IT DISTRIBUTION, INC.



FILED Feb 02, 2007 08:00 AM **Secretary of State**

Principal Place of Business

Mailing Address

7006 NW 40TH ST 7006 NW 40TH ST CORAL SPRINGS, FL 33065

CORAL SPRINGS, FL 33065-2207 US



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 01042007

4. FEI Number 65-0571557

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCKNIGHT, MICHAEL A 7006NW 40TH ST CORAL SPRINGS, FL 33065			DO NOT WRITE IN THIS SPACE			
	named entity submits this statement for the plions of registered agent. Signature, typed or printed name of registered agent and title			egistered agent, or bo	oth, in the State of Florida. I am familiar with,	and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finar Trust Fund Contribution.	~	\$5.00 May Be Added to Fees	U00000618352 02/08/07-80025-018 150.	00
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND DIRECT D MCKNIGHT, MICHAEL A 7006 NW 40TH ST. CORAL SPRING, FL 330652207 D MCKNIGHT, CAROLYN S 7006 NW 40TH ST. CORAL SPRING, FL 330652207	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP				iN	THIS SPACE	
NAME STREET ADDRESS						• •

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP