


FILED
Apr 28, 2006 08:00 AM
Secretary of State

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # S37447 1. Entity Name ST. JOSEPH'S PREFERRED, INC.	
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Principal Place of Business 3001 W. DR. MARTIN L. KING JR. BLVD. TAMPA, FL 33607 US	Mailing Address 3001 W. DR. MARTIN L. KING JR. BLVD. ATTN: ISAAC MALLAH TAMPA, FL 33607 US
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04212006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3055843	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MALLAH, ISAAC 3001 W. DR. MARTIN L. KING JR. BLVD. TAMPA, FL 33607	<p style="font-size: 24px; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	CD
NAME	MALLAH, ISAAC
STREET ADDRESS	3001 W DR MARTIN LUTHER KING JR BLVD
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	D
NAME	LUTTON, LARRAINE
STREET ADDRESS	3001 W DR MARTIN LUTHER KING JR BLVD
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	D
NAME	VAALER, MARK MO
STREET ADDRESS	3001 W DR MARTIN LUTHER KING JR BLVD
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
 IN THIS SPACE

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.

SIGNATURE: Isaac Mallah 4-25-06 (813) 870-4020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date