




FILED
Aug 17, 2005 8:00 am
Secretary of State

07-25-2005 90107 025 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P93000071550			
1. Entity Name GULFVIEW PROPERTIES OF TAMPA, INC.			
Principal Place of Business 1220 S DALE MABRY HWY SUITE 201 TAMPA, FL 33629		Mailing Address 1220 S DALE MABRY HWY SUITE 201 TAMPA, FL 33629	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3205794		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CANNELLA, JOSEPH V 1220 S DALE MABRY HWY SUITE 201 TAMPA, FL 33629		7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
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:  PRESIDENT DATE: 7-28-05 (NOTE: Registered Agent Signature required when reappointing)			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANNELLA, JOSEPH V 1220 S DALE MABRY HWY SUITE 201 TAMPA, FL 33629 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  DATE: 7-28-05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

ATTACHMENT # P3000071550
JUNCO & KIERZYNSKI 66025876
CERTIFIED PUBLIC ACCOUNTANTS, P.A.

1211 N. WESTSHORE BLVD.
SUITE 715
TAMPA, FLORIDA 33607

TELEPHONE:
(813) 281-9090
FAX:
(813) 288-8483

July 1, 2005

Florida Department of State
Glenda E. Hood, Secretary of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

RE: Joseph V. Cannella Realty, Inc.
1220 S. Dale Mabry Hwy.
Tampa, FL 33629

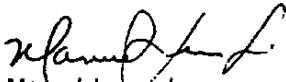
Gulfview Properties of Tampa, Inc.
1220 S. Dale Mabry Hwy, Suite 202
Tampa, FL 33629

Dear Ms. Hood:

My client received the attached "Notice of Intent to Dissolve" and they were quite surprised as they thought it had been paid. My client has been very sick in the past year with pancreatic cancer and thus unable to keep functioning as he has in the past. He told his secretary to mail the attached check to your office in April 2005, but since he received your intent to dissolve care, he checked and found that she had not mailed the check to you as she was suppose to. In the meantime, she quit her job with my client.

This error will not occur in the future. Please accept this check as payment for his registration fee.

Sincerely,



Manuel Junco, Jr.
Certified Public Accountant



ATTACHMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

66025876

July 12, 2005

JUNCO & KIERZYNSKI
1211 N WESTSHORE BLVD
SUITE 715
TAMPA, FL 33607

SUBJECT: GULFVIEW PROPERTIES OF TAMPA, INC.
Ref. Number: ~~P93000071550~~

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/reinstatement application form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner
Senior Section Administrator

Letter Number: 905A00045931