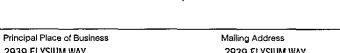
2005 FOR PROFIL CORPORATION ANNUAL REPORT

FILED May 05, 2005 08:00 AM Secretary of State

DOCUMENT # P94000074867
CAMBAS HOLDING COMPANY, INC.



CLEARWATER		CLEARWATER, FL 33759	-			
DO NOT WRITE IN THIS SPACE			CE	04262005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied Not App. 5. Certificate of Status Desired S8.75 Additional Fee Required	For licable	
	6. Name and Address of Current Reg	stered Agent		The same of the sa		
GOLD, AARON J 704 WEST BAY STREET TAMPA, FL 33606				DO NOT WRITE IN THIS SPACE		
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 or registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees						
10.	OFFICERS AND DIRE	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CAMBAS, NICHOLAS A 2939 ELYSIUM WAY CLEARWATER, FL 33759 DVP CAMBAS, CHRISTOPHER J 4603 RUE BORDEAUX LUTZ, FL 33558			U00000363193 05/05/05-80151-004 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filling 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 trusted 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:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cambas 4.28.00

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