


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 20, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P97000040217</b>		
1. Entity Name 6770 INVESTMENT CORP.		
Principal Place of Business 6770 COLLINS AVE. MIAMI BEACH, FL 33141	Mailing Address 10720 CARIBBEAN BLVD. SUITE 101 MIAMI, FL 33189 US	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  SPORT, WILLIAM 10720 CARIBBEAN BLVD., STE 101 MIAMI, FL 33189		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		U000000520808 05/02/06-80108-017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPORT, WILLIAM 10720 CARIBBEAN BLVD., STE 101 MIAMI, FL 33189	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GENTILE, ANDREA 10720 CARIBBEAN BLVD., STE 101 MIAMI, FL 33189	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SPORT, BRENDA 10720 CARIBBEAN BLVD., STE 101 MIAMI, FL 33189	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 <i>Andrea Gentile</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<i>4/13/06 3052358881</i> <small>Date Daytime Phone #</small>