

FILED
May 01, 2007 8:00 am
Secretary of State

04-19-2007 90416 048 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000065338		
1. Entity Name BLUE COUGAR REALTY INVESTMENTS, INC.		
Principal Place of Business 3250 MARY ST STE 500 MIAMI, FL 33133		Mailing Address 3250 MARY ST STE 500 MIAMI, FL 33133
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PELTZ, ARVIN 3250 MARY ST STE 500 MIAMI, FL 33133		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 is typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when registering)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SIBLEY, PETER L 3250 MARY ST STE 500 MIAMI, FL 33133	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MEERBOTT, TERRI 10287 SW 77TH CT MIAMI, FL 33156	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied on this form 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 which I am so empowered.		
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		5/1/07 705 301 291 Date Daytime Phone #