

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000101721

**Entity Name:** RESPIRA INC.

**Current Principal Place of Business:**

100 SE 2ND STREET  
SUITE 2300  
MIAMI, FL 33131

**Current Mailing Address:**

100 SE 2ND STREET  
SUITE 2300  
MIAMI, FL 33131 US

**FEI Number:** 87-3910760

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COLOMAR GARCIA, MARTA ESQ.  
100 SE 2ND STREET  
SUITE 3400  
MIAMI, FL 33131 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            P  
Name            LEVY, LEON  
Address        100 SE 2ND STREET  
                  SUITE 2300  
City-State-Zip: MIAMI FL 33131

Title            CTO  
Name            SABARIS, JOAQUIN  
Address        100 SE 2ND STREET  
                  SUITE 2300  
City-State-Zip: MIAMI FL 33131

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LEON LEVY

**PRESIDENT**

**01/29/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date