2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 26, 2007 8:00 am Secretary of State

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DOCUMENT # L84015 1. Entity Name RESPIFLOW, INC.					03-26-2007 90047 028 ***150.00				
Principal Place	e of Business	Mailing Address							
EEE MADISON	N AVENUE	555 MADISON AVENUE			00000	ቦሣጋ			
				60028	619				
30TH FLOOR NEW YORK, NY 10022 NEW YORK, NY 10022									
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9 Di in 1 Di	han at Dusiness No DO Bourt	2 Marilina Address							
へいとつ	ace of Business - No P.O. Box #	3. Mailing Address	1.100.10		I DER BERLEIT DE LE LEUR BERLEIT	BIII RIBII RIBII BIBII			
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Suite, Apt. #, etc. Suite, Apt. #, etc.				02222007	Chg-P	CR2E03	4 (12/06)		
39th Floor 39th Floor							,		
City & State, City & State		M	4. FEI Numbe	er		App	olied For		
Now 1	New York, NY New York, NY		Y	59-301	4809		Not	Applicable :	
Zip	Country	Zip	Country		10	\$	8.75 Addi	itional	
10167	1154	10167	USA .	5. Certificate	of Status Desired		ee Required		
10/0/	6. Name and Address of Current I	Registered Agent	42,	7. Name and	Address of New	Registered Ad	ent		
	o, name and Address of Garrows		Name						
NDALCED	VICES INC								
NRAI SERVICES, INC.				aress (P.O. Box Numbe	ess (P.O. Box Number is Not Acceptable)				
2731 EXECUTIVE PARK DRIVE				Office (Address (1.0. Day Maillock is Not Acceptable)					
SUITE 4									
WESTON,	FL 33331								
			City			FL	Zip Cooe		
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	named entity submits this statement for	the purpose of changing its re	gistered office or r	registered agent, or bo	th, in the State of	Florida. I am fa	miliar with, a	and accept	
the obligat	ions of registered agent.								
SIGNATURE.	Signature, typed or printed name of registered agent a	and tale 4 applicable (MOTE: R	enistered Anent sanetur	e required when reinstating)		DATE			
	Special et appears printed mane or registered agent a	t to the supplementation of the supplementati	og stores / igent signales						
			F	65.00					
	E NOW!!! FEE IS \$150.00	9. Election Campaign Trust Fund Contrib		\$5.00 May Be Added to Fees					
After Ma	ay 1, 2007 Fee will be \$550.0	1 rust Fund Contino	ulion. :i	Added to Fees					
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS	CHANGES TO O	FEICERS AND I	DIRECTORS	IN 11	
	VP OFFICER AND I		<b>8</b>	7.0011101107	011141020100		Change	( Agailian	
TITLE		☐ Delete	TITLE				Let change	[] Addition	
NAME	EAMES, SARAH L			215 2 4 1		۱			
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·			240 back th	renue, 39	n Floor			
CITY-ST-ZIP	NEW YORK, NY 10022		CITY-ST-ZIP	245 Park A. Nowyork,	N/ 1011	<u> </u>			
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NAME	ABBASSI, MARVET		NAME		_				
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·			245 Pack 1	Avenue.	39th Floo	· C		
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ļ <u></u>				NEW VOIL	101101	Ψ /		2273	
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NAME	AITKEN, TIMOTHY		NAME		Δ .	20 46 11			
STREET ADDRESS				245 Park	Avenue,	39177	<i>30/</i>		
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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: March Ologosi 22007 210-750-0064

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dale

Date

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