

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F43130

**Entity Name:** IDEL PHARMACY, INC.

**Current Principal Place of Business:**

3314 W. COLUMBUS DR.  
TAMPA, FL 33607

**Current Mailing Address:**

3314 W. COLUMBUS DR.  
TAMPA, FL 33607

**FEI Number:** 59-2131126

**Certificate of Status Desired:** No

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

SUAREZ, ILLAN  
3314 W. COLUMBUS DR.  
TAMPA, FL 33607 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 SECRETARY, TREASURER  
Name SUAREZ, ILLAN DR.  
Address 3316 W AILEEN STREET  
City-State-Zip: TAMPA FL 33607

Title P  
Name SUAREZ, IDEL  
Address 306 PRUETT RD  
City-State-Zip: SEFFNER FL 33584

*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:** ILLAN SUAREZ

SEC/TRE

01/10/2017

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

\_\_\_\_\_ Date