

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000011986

Entity Name: T&T PHARMACY/DME CONSULTING, INC.

Current Principal Place of Business:

5293 SANCERRE CIRCLE
WEST PALM BEACH, FL 33463

Current Mailing Address:

PO BOX 670452
CORAL SPRINGS, FL 33067

FEI Number: 80-0267836

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BROWN, TREPHENE C
5293 SANCERRE CIRCLE
WEST PALM BEACH, FL 33463 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 BROWN, TREPHENE C
Address 5293 SANCERRE CIRCLE
City-State-Zip: WEST PALM BEACH FL 33463

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: TREPHENE BROWN

OWNER

01/15/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date