

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000054101

**Entity Name:** PRESCRIPPS, INC.

**Current Principal Place of Business:**

942 JOHNSON STREET  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

942 JOHNSON STREET  
HOLLYWOOD, FL 33019 US

**FEI Number:** 87-1181854

**Certificate of Status Desired:** Yes

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

DEANE, ZAIN  
942 JOHNSON STREET  
HOLLYWOOD, FL 33019 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           CEOD  
Name           DEANE, ZAIN  
Address        942 JOHNSON STREET  
City-State-Zip: HOLLYWOOD FL 33019

Title           COOD  
Name           CAAMAL, FATIMA NATALIA  
Address        942 JOHNSON STREET  
City-State-Zip: HOLLYWOOD FL 33019

Title           CTOD  
Name           CASAS, OSCAR  
Address        103 PINEHURST LANE  
City-State-Zip: BOCA RATON FL 33431

Title           D  
Name           CUSICK, DAVID  
Address        1525 FAITH RIVER PATH  
City-State-Zip: WENDELL NC 27591

*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:** ZAIN DEANE

**CEO**

**02/23/2024**

Electronic Signature of Signing Officer/Director Detail

Date