

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000012791

Entity Name: TAMPA PHARMA DIRECT, LLC

Current Principal Place of Business:

5850 W. CYPRESS ST
SUITE B
TAMPA, FL 33602

Current Mailing Address:

5850 W. CYPRESS ST
SUITE B
TAMPA, FL 33602 US

FEI Number: 83-3152783

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FRANK CHARLES MIRANDA, P.A.
3226 W. CYPRESS ST.
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

Authorized Person(s) Detail :

Title AMBR
Name MACLAREN, CHRISTOPHER
Address 6918 GUNN HWY SUITE C
City-State-Zip: TAMPA FL 33625

Title AMBR
Name WILLIAMS, BRIAN R
Address 6918 GUNN HWY SUITE C
City-State-Zip: TAMPA FL 33625

Title AMBR
Name MARCOTTE, ANTHONY
Address 6918 GUNN HWY SUITE C
City-State-Zip: TAMPA FL 33625

Title AMBR
Name GRAY, RICHARD
Address 6918 GUNN HWY SUITE C
City-State-Zip: TAMPA FL 33625

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: M.CHRISTOPHER MACLAREN, DO

MANAGER

08/05/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date