TRANIECE YVETTE FULLWOOD

License Number: PS59921

Data As Of 7/3/2025

Profession Pharmacist License PS59921 License Status Clear/Active

Qualifications Certified To Administer Immunizations

License Expiration Date 9/30/2025

License Original Issue

Date

09/03/2019

Address of Record

CVS Pharmacy 16550 ne 6th ave

NORTH MIAMI, FL 33162

Discipline on File Public Complaint Yes

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

Name	License	Profession	City	State	Case#	Action Taken
FULLWOOD, TRANIECE	59921	PHARMACIST	NORTH MIAMI	FL	202440420	AC FILED
YVETTE						

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

Discipline Public Records Request

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at: Division of Medical Quality Assurance

Public Records

4052 Bald Cypress Way, Bin C01 Tallahassee, FL 32399-3251

Please include the following:

- 1. Full name and license number of the practitioner;
- 2. Name and address where documents are to be sent; and
- 3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
HOLIDAY CVS, L.L.C.	PDM/CORSUBORDINATE	PHARMACY	21046	3/29/2021

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