

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000030504

**Entity Name:** WALGREENS PARTNERSHIP INC

**Current Principal Place of Business:**

3201 NE 183 STREET  
501  
AVENTURA, FL 33160

**Current Mailing Address:**

3201 NE 183 STREET  
501  
AVENTURA, FL 33160 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LAW OFFICE OF ILANA KALICHMAN- ARTZY PA  
19390 COLLINS AVE  
B3  
SUNNY ISLES, FL 33160 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 RIVERLAND GAS & OIL INC  
Address 9245 PARKLAND BAY DR  
City-State-Zip: PARKLAND FL 33076

Title S  
Name CARLA PFEFFER TRUST  
Address 15923 BISCAYNE BLVD SUITE 201B  
City-State-Zip: MIAMI FL 33160

*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:** ILANA KALICHMAN-ARTZY

**PRESIDENT**

**03/02/2023**

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

\_\_\_\_\_  
Date