

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000015067

**Entity Name:** ZAR REAL ESTATE, LLC

**Current Principal Place of Business:**

260 NW PEACOCK BLVD  
PORT SAINT LUCIE, FL 34986

**Current Mailing Address:**

260 NW PEACOCK BLVD  
PORT SAINT LUCIE, FL 34986 US

**FEI Number:** 86-1614370

**Certificate of Status Desired:** No

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

RAY, PETER R  
712 US HIGHWAY ONE, SUITE 400  
NORTH PALM BEACH, FL 33408 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 MGR  
Name KATZ, ALEXANDER  
Address 260 NW PEACOCK BLVD  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title MEM  
Name IKID REAL ESTATE LLC  
Address 260 NW PEACOCK BLVD  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title MEM  
Name NAHAS, ZAYNA  
Address 260 NW PEACOCK BLVD  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title MEM  
Name VICKERS, ROB  
Address 260 NW PEACOCK BLVD  
City-State-Zip: PORT SAINT LUCIE FL 34986

*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:** ALEXANDER KATZ

MGR

01/13/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date