

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000226206

**Entity Name:** ZINGAAT LLC

**Current Principal Place of Business:**

3109 BUFFINGTON PLACE  
OVIEDO, FL 32765

**Current Mailing Address:**

3109 BUFFINGTON PLACE  
OVIEDO, FL 32765 US

**FEI Number:** 86-3858036

**Certificate of Status Desired:** No

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

ACCOUNTAX SERVICES  
2323 TOPAZ ISLE LANE  
APOPKA, FL 32712 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 PATIL, VISHAL  
Address 3109 BUFFINGTON PLACE  
City-State-Zip: OVIEDO FL 32765

Title AMBR  
Name SOLAT, SAGAR  
Address 8 WYNDMOOR WAY  
City-State-Zip: EDISON NJ 08820

Title AMBR  
Name KILWAR LLC  
Address 1002 PENNY LANE  
City-State-Zip: SCOTCH PLAINS NJ 07076

Title AMBR  
Name MHASKAR, RAHUL  
Address 20753 GREAT LAUREL AVE  
City-State-Zip: TAMPA FL 33647

Title AMBR  
Name GARDEN 2 GROW LLC  
Address 13809 LAKE FISHHAWK DR  
City-State-Zip: LITHIA FL 33547

*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:** PATIL VISHAL

AMBR

03/25/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date