



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
148 W. River St., Providence, RI 02904-2615  
401-222-3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c)(4)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 126307		2. Name of Corporation ZGS Providence, Inc.			
3. Street Address Principal Business Office 23 KENNEY DRIVE			City CRANSTON	State RI	Zip 02920-
4. Business Phone No. 4014635575		5. State of Incorporation DELAWARE			
6. Brief Description of the Character of Business Conducted in Rhode Island MANAGING, OPERATING AND OWNING ONE OR MORE FOR-PROFIT COMMERCIAL RADIO OR TELEVISION BROADCAST STATIONS.					
7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Ronald Gordon			Vice President Name Eduardo Zavala		
Street Address 5101 Little Falls Road			Street Address 200 West Greenway Boulevard		
City Arlington	State VA	Zip 22201	City Falls Church	State VA	Zip 22046
Secretary Name Ericka Johnson			Treasurer Name		
Street Address 1013 Downing Court			Street Address		
City Mitchellville	State MD	Zip 20721	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Ronald Gordon			Director Name Eduardo Zavala		
Street Address 5101 Little Falls Road			Street Address 200 West Greenway Boulevard		
City Arlington	State VA	Zip 22201	City Falls Church	State VA	Zip 22046
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 COMM	\$1.00 PAR VALUE		800	Comm	\$1.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.



1 2 6 3 0 7

\*126307 FBC 02/03/06 04:53:36 PM\*

File Date **FILED**

Check No. **FEB 27 2006**

By **By MAJ 459**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

*Ericka Johnson* 2-3-06  
Signature of Officer Date

Ericka Johnson  
Print or Type Name of Officer

Secretary  
Title of Officer

Form 630 12/05



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
148 W. River St., Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

\* In accordance with R.I.G.L. 7-1.2-150(c), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-150(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 126307		2. Name of Corporation ZGS Providence, Inc.			
3. Street Address Principal Business Office 23 KENNEY DRIVE		City CRANSTON	State RI	Zip 02920-	
4. Business Phone No. 4014635575		5. State of Incorporation DELAWARE			
6. Brief Description of the Character of Business Conducted in Rhode Island MANAGING, OPERATING AND OWNING ONE OR MORE FOR-PROFIT COMMERCIAL RADIO OR TELEVISION BROADCAST STATIONS.					
7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Ronald Gordon		Vice President Name Eduardo Zavala			
Street Address 5101 Little Falls Road		Street Address 200 West Greenway Boulevard			
City Arlington	State VA	Zip 22201	City Falls Church	State VA	Zip 22046
Secretary Name Ericka Johnson		Treasurer Name			
Street Address 1013 Downing Court		Street Address			
City Mitchellville	State MD	Zip 20721	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Ronald Gordon		Director Name Eduardo Zavala			
Street Address 5101 Little Falls Road		Street Address 200 West Greenway Boulevard			
City Arlington	State VA	Zip 22201	City Falls Church	State VA	Zip 22046
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 COMM \$1.00 PAR VALUE			800	Comm	1.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.



1 2 6 3 0 7

\*126307 FBC 02/03/06 01:53:36 PM\*

**FILED**

File Date **FEB 27 2006**

Check No. **By M91459**

By: **FOR SECRETARY OF STATE USE ONLY**

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

*Ericka Johnson* 2-3-06  
Signature of Officer Date  
Ericka Johnson  
Print or Type Name of Officer  
Secretary  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

126307

2. Name of Corporation

ZGS Providence, Inc.

3. Street Address Principal Business Office

23 Kenney Drive

City

Cranston

State

RI

Zip

02920

4. Business Phone No.

401-463-5575

5. State of Incorporation

DELAWARE

6. SIC Code

8888

7. Brief Description of the Character of Business Conducted in Rhode Island

Spanish Language Television Broadcasting

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Ronald J. Gordon

Vice President Name

Eduardo A. Zavala

Street Address

5101 Little Falls Road

Street Address

200 West Greenway Boulevard

City

Arlington

State

VA

Zip

22207

City

Falls Church

State

VA

Zip

22046

Secretary Name

Ericka Johnson

Treasurer Name

Ronald J. Gordon

Street Address

1013 Downing Court

Street Address

5101 Little Falls Road

City

Mitchellville, MD

State

Zip

20721

City

Arlington

State

VA

Zip

22207

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Ronald J. Gordon

Director Name

Eduardo A. Zavala

Street Address

same as above

Street Address

same as above

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

1,000 COMM \$1.00 PAR VALUE

800

Common

\$1.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 2 6 3 0 7 \*

File Date: 3-19-03

Check No.: 13075

By: IUP

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

ERICKA JOHNSON

Date

3-3-03

Print or Type Name of Officer

Title of Officer

SECRETARY