

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**Jan 28 1997 8:00am**  
**Secretary of State**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1997**



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # V36425 (9)**

**1. Corporation Name**  
**ZENITH GOLDLINE SHREVEPORT, INC.**



**Principal Place of Business**

**8910 LINWOOD AVE  
SHREVEPORT LA 71106  
US**

**Mailing Address**

**8800 N.W. 36TH STREET  
MIAMI FL 33178-2404**

**3. Date Incorporated or Qualified**  
**05/15/1992**

**3a. Date of Last Report**  
**01/31/1996**

**2. Principal Place of Business**

**21** Suite, Apt. #, etc.

**22** City & State

**23** Zip

**25** Country

**2a. Mailing Address**

**26 4400 Biscayne Boulevard**

Suite, Apt. #, etc.

**27** City & State

**28 Miami, Florida**

**29** Zip

**33137**

**30** Country

**USA**

**4. FEI Number**

**65-0353757**

**Applied For**

**Not Applicable**

**5. Certificate of Status Desired**

☐

**\$8.75 Additional  
Fee Required**

**6. Election Campaign Financing**

☐

**\$5.00 May Be  
Added to Fees**

**8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes**

☒

**Yes**

☐

**No**

**9. Name and Address of Current Registered Agent**

**TABERNILLA, ARMANDO A.  
8800 NW 36TH STREET  
MIAMI FL 33178**

**10. Name and Address of New Registered Agent**

**81** Name

**Tabernilla, Armando A.**

**82** Street Address (P.O. Box Number is Not Acceptable)

**4400 Biscayne Boulevard**

**83**

**84** City

**Miami**

**FL**

**85** Zip Code

**33137**

**11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.**

**SIGNATURE**

Signature of person named as registered agent and, if applicable,

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**12. OFFICERS AND DIRECTORS**

**TITLE** **PD** ☐ **DELETE**  
**NAME** **KLEIN, JOHN H.**  
**STREET ADDRESS** **140 LAGRAND AVENUE**  
**CITY-ST-ZIP** **NORTHVALE NJ**

**TITLE** **VPD** ☐ **DELETE**  
**NAME** **PFENNIGER, RICHARD C. JR**  
**STREET ADDRESS** **8800 NW 36TH STREET**  
**CITY-ST-ZIP** **MIAMI FL**

**TITLE** **SD** ☐ **DELETE**  
**NAME** **TABERNILLA, ARMANDO A.**  
**STREET ADDRESS** **8800 NW 36TH STREET**  
**CITY-ST-ZIP** **MIAMI FL**

**TITLE** **VP** ☐ **DELETE**  
**NAME** **WOODRUFF, CHARLES W.**  
**STREET ADDRESS** **8910 LINWOOD AVENUE**  
**CITY-ST-ZIP** **SHREVEPORT LA**

**TITLE** **VP** ☐ **DELETE**  
**NAME** **FRIEDMAN, RICHARD**  
**STREET ADDRESS** **140 LAGRAND AVENUE**  
**CITY-ST-ZIP** **NORTHVALE NJ**

**TITLE** **VP** ☐ **DELETE**  
**NAME** **GLOVER, RANDY**  
**STREET ADDRESS** **50 NW 176 STREET**  
**CITY-ST-ZIP** **MIAMI FL**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

**1.1 TITLE** ☐ **Change** ☐ **Addition**  
**1.2 NAME**  
**1.3 STREET ADDRESS** **SEE ATTACHED LIST**  
**1.4 CITY-ST-ZIP**

**2.1 TITLE** ☐ **Change** ☐ **Addition**  
**2.2 NAME**  
**2.3 STREET ADDRESS**  
**2.4 CITY-ST-ZIP**

**3.1 TITLE** ☐ **Change** ☐ **Addition**  
**3.2 NAME**  
**3.3 STREET ADDRESS**  
**3.4 CITY-ST-ZIP**

**4.1 TITLE** ☐ **Change** ☐ **Addition**  
**4.2 NAME**  
**4.3 STREET ADDRESS**  
**4.4 CITY-ST-ZIP**

**5.1 TITLE** ☐ **Change** ☐ **Addition**  
**5.2 NAME**  
**5.3 STREET ADDRESS**  
**5.4 CITY-ST-ZIP**

**6.1 TITLE** ☐ **Change** ☐ **Addition**  
**6.2 NAME**  
**6.3 STREET ADDRESS**  
**6.4 CITY-ST-ZIP**

**14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.**

**SIGNATURE:**

*Dora B. Rubin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Dora B. Rubin**

Date

**1/20/97**

**305-575-6000**

Daytime Phone #

CP2E034 (9/96)

**1997 FLORIDA CORPORATION ANNUAL REPORT  
ZENITH GOLDLINE SHREVEPORT, INC.**

**Question 13**

**PD**

**Schreck, William F.**

**1900 West Commercial Boulevard, Fort Lauderdale, FL 33309**

**V**

**Woodruff, Charles**

**1900 West Commercial Boulevard, Fort Lauderdale, FL 33309**

**VD**

**Pfenniger, Richard C.**

**4400 Biscayne Boulevard, Miami, FL 33137**

**V**

**Hanson, John**

**1900 West Commercial Boulevard, Fort Lauderdale, FL 33309**

**V**

**Long, Thomas**

**1900 West Commercial Boulevard, Fort Lauderdale, FL 33309**

**V**

**Fipps, Michael W.**

**4400 Biscayne Boulevard, Miami, FL 33137**

**SD**

**Tabernilla, Armando A.**

**4400 Biscayne Boulevard, Miami, FL 33137**

**AT**

**Siegel, Jordan**

**4400 Biscayne Boulevard, Miami, FL 33137**

**AS**

**Rubin, Dora B.**

**4400 Biscayne Boulevard, Miami, FL 33137**