2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F05000004255

NEWS GROUP DISTRIBUTION SERVICES INC.



Principal Place of Business

1067 WEST CORDOVA STREET

#1800 VANCOUVER, BC, CANADA, V6C-1C7 XX

Mailing Address

1067 WEST CORDOVA STREET

#1800

VANCOUVER, BC, CANADA, V6C-1C7 XX

FILED Feb 05, 2007 08:00 AM **Secretary of State**



01082007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1972303

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the prions of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_					DATE	
	Signature, typed or printed name of registered agent and title if	applicable. (NOTE, Registered A	Dauf eiduetnie	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financia Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SINGSTOCK, TOM 2571 SARADAN DRIVE JACKSON, MI 49202					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DESMARAIS, NICK 1800 - 1067 WEST CORDOVA STREET VANCOUVER, BC V6C 1C7,				U00000619942 02/09/07-80017-011 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CZAJKOWSKI, KEN 9501 SLALOM DRIVE ANCHORAGE, AK 99507			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental leport 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 10 or Block 11 if changed, or on an attachment

SIGNATURE:

CITY-ST-ZIP

Jan. 24/07 (604) 688-6764