## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000004255

City-St-Zip:

ANCHORAGE, AK 99507

Entity Name: NEWS GROUP DISTRIBUTION SERVICES INC.

FILED Jul 23, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1067 WEST CORDOVA STREET #1800				1067 WEST CORDOVA STREET #1800			
	/ER, BC, CANAI	DA, V6C1C7	XX	VANCOUVER, BC V6C1C7			
Current M	lailing Address	:		New Maili	ng Address	:	
1067 WEST CORDOVA STREET				1067 WEST CORDOVA STREET			
#1800 VANCOUVER, BC, CANADA, V6C1C7 XX				#1800 VANCOUVER, BC V6C1C7			
FEI Number:	: 20-1972303	FEI Number Applie	ed For ( ) FEI Nu	mber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1200 SOU	PORATION SYST TH PINE ISLANI ION, FL 33324						
	named entity su of Florida.	bmits this statem	nent for the purpose o	of changing i	ts registered	d office or registered agent, or bot	ih,
SIGNATUR	RE:						
	Electronic	Signature of Re	gistered Agent			Date	_
		2)(b), F.S., the corp Frust Fund Contrib	ooration did not receive ution ( ).	the prior notic	e.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP () D SINGSTOCK, TOI 2571 SARADAN D JACKSON, MI 49	DRIVE		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DESMARAIS, NIC	ST CORDOVA STRE	ET	Title: Name: Address: City-St-Zip:	DESMARAIS 1800 - 1067	(X) Change()Addition , NICK WEST CORDOVA STREET R, BC V6C 1C7	
Title: Name: Address:	DVP () C CAZJKOWSKI, K 9501 SLALOM DF			Title: Name: Address:		( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: NICK DESMARAIS S 07/23/2008