


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

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90285 025 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # F96000002880 (0)</b> 1. Corporation Name <b>THE NEWS GROUP INC.</b>					
Principal Place of Business 1055 W. HASTINGS ST. VANCOUVER BC CANADA V6E -2H2			Mailing Address 1055 W. HASTINGS ST. VANCOUVER BC CANADA V6E -2H2		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country			2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code		
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 _____ DATE _____ (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	<input type="checkbox"/> DELETE	1.1 TITLE	D CEO	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHELLENBERG, DAVID		1.2 NAME		
STREET ADDRESS	1055 W. HASTINGS ST., 16TH FLOOR		1.3 STREET ADDRESS		
CITY - ST - ZIP	VANCOUVER BC CANADA V6E -2H2		1.4 CITY - ST - ZIP		
TITLE	DCEO	<input checked="" type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEAR, P N		2.2 NAME		
STREET ADDRESS	1055 W. HASTINGS ST., 16TH FLOOR		2.3 STREET ADDRESS		
CITY - ST - ZIP	VANCOUVER BC CANADA V6E -2H2		2.4 CITY - ST - ZIP		
TITLE	SD	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DESMARAIS, NICK		3.2 NAME		
STREET ADDRESS	1055 W. HASTINGS ST., 16TH FLOOR		3.3 STREET ADDRESS		
CITY - ST - ZIP	VANCOUVER BC CANADA V6E -2H2		3.4 CITY - ST - ZIP		
TITLE	P	<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEEBACK, JOHN		4.2 NAME		
STREET ADDRESS	5104 N I-85 SERVICE RD., #14		4.3 STREET ADDRESS		
CITY - ST - ZIP	CHARLOTTE NC 28206		4.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			5.2 NAME	ROD BERGEN	
STREET ADDRESS			5.3 STREET ADDRESS	24675-16th Avenue	
CITY - ST - ZIP			5.4 CITY - ST - ZIP	LANGLEY, BC V2Z 1J4	
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		

14. I 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.

NICK DESMARAIS, APRIL 27/99 604-688-6764