

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: MYWAVEZ CORPORATION

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 440 N. WOLFE ROAD, SUNNYVALE, CA 94085

Name of Agent Designated to Receive Notification of Claimed Infringement: BILLY RAMIREZ

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

440 N. WOLFE ROAD, SUNNYVALE, CA 94085

Telephone Number of Designated Agent: 408 - 524 - 1491

Facsimile Number of Designated Agent: 408 - 716 - 2772

Email Address of Designated Agent: copyright@mywavezcorp.com

Signature of Officer or Representative of the Designating Service Provider: _____ Date: 08/07/06

Typed or Printed Name and Title: RAJEEV RAMAN, CEO

SCANNED 09 20-2006

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.



RECEIVED

AUG 15 2006

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