

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

Full Legal Name of Service Provider: MYPRIMETIME, INC.

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

Address of Service Provider: 410 JESSIE ST., STE. 300, SAN FRANCISCO, CA 94103

Name of Agent Designated to Receive Notification of Claimed Infringement: GLENN BOEHLEIN

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):

MYPRIMETIME, INC., 410 JESSIE ST., STE. 300
SAN FRANCISCO, CA 94103

Telephone Number of Designated Agent: 415 932 3900

Facsimile Number of Designated Agent: 415 975 9999

Email Address of Designated Agent: GLENN@MYPRIMETIME.COM

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 4-02-2001

Typed or Printed Name and Title: GLENN BOEHLEIN, CFO

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

RECEIVED

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