

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

Full Legal Name of Service Provider: WWTE, Inc.

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

Address of Service Provider: c/o NRAI 1000 E. William St, Ste 204, Carson City NV 89701

Name of Agent Designated to Receive
Notification of Claimed Infringement: IP/Trademark Counsel

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):
WWTE, Inc. c/o NRAI 1000 East William Street, Suite 204, Carson City, N V 89701

Telephone Number of Designated Agent: (425) 679-3757

Facsimile Number of Designated Agent: (425) 679-7251

Email Address of Designated Agent: wwte-copyright@wwte.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: April 21, 2008

Typed or Printed Name and Title: Sean Croman, Attorney

SCANNED 0 - 27 / 2008

**Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee
Made Payable to the Register of Copyrights.**



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