

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

Full Legal Name of Service Provider: Latin Pulse Music Inc.

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

Address of Service Provider: 1945 N. Carson St., Carson City, NV 89701

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Michael P. Lazarus

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):
Michael P. Lazarus, 150 Estrella Drive, Scotts Valley, CA 95066

Telephone Number of Designated Agent: 775.230.6501

Facsimile Number of Designated Agent: none

Email Address of Designated Agent: michael@latinpulsemusic.com

Signature of Officer or Representative of the Designating Service Provider:

_____ Date: 11.09.2006

Typed or Printed Name and Title: Michael P. Lazarus, President Latin Pulse Music Inc.

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

SCANNED 12 08 - 2006



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