

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

Full Legal Name of Service Provider: WonderWave.net

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

Address of Service Provider:

3204 Hillside Drive, Wonder Lake IL 60097

**Name of Agent Designated to receive Notification of Claimed
Infringement:** Michael Hasten

Full Address to which Notification should be sent:

3204 Hillside Drive, Wonder Lake IL 60097

Telephone Number: 815-653-7873

Facsimile Number: 815-653-8841

Email Address of Designated Agent: mike@wonderwave.net

Signature of Officer of Designating Service Provider:

Michael Hasten, President

Date: 9/11/00

RECEIVED

SEP 15 2000

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