

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

Full Legal Name of Service Provider: EYESPOT CORPORATION

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): EYESPOT CORPORATION, EYESPOT, www.eyespot.com, eyespot.com

Address of Service Provider: 704 MIDORI COURT, SOLANA BEACH, CA 92075

Name of Agent Designated to Receive Notification of Claimed Infringement: JIM H. KASKADE

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):

EYESPOT CORPORATION, ATTN: JIM KASKADE,
704 MIDORI COURT, SOLANA BEACH, CA 92075

Telephone Number of Designated Agent: 619-985-6271

Facsimile Number of Designated Agent: 858-509-1480

Email Address of Designated Agent: jim.kaskade@eyespotcorp.com

Signature of Officer or Representative of the Designating Service Provider:

_____ Date: 01/26/06

Typed or Printed Name and Title: JIM KASKADE, PRESIDENT & CEO

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

SCANNED 2 / 1 0 / 0 6

RECEIVED

JAN 26 2006

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