

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

**Full Legal Name of Service Provider:** Kefta.com, Inc.

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

**Address of Service Provider:** 153 Kearny Street, Suite 209 San Francisco, CA 94108

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Robert Rosen

**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):  
Kefta.com 153 Kearny Street, Suite 209 San Francisco, CA 94108

**Telephone Number of Designated Agent:** 415-391-6881 ext. 8017

**Facsimile Number of Designated Agent:** 415-391-7079

**Email Address of Designated Agent:** rosen@kefta.com

**Signature of Officer or Representative of the Designating Service Provider:** \_\_\_\_\_

**Date:** 6-29-00

**Typed or Printed Name and Title:** Robert Rosen - office Manager

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

**RECEIVED**

**JUL 06 2000**

**COPYRIGHT OFFICE**

115396966

