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

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Full Legal Name of Service Provider: Sound Dedia Pte	Ltol
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):	
Address of Service Provider: Po Box 2 Harrison, NY	10 528-0002
Address of Service Provider: 10 DEX L	
Name of Agent Designated to Receive Sacoh Golstew Notification of Claimed Infringement: Sacoh Golstew	1
Full Address of Designated Agent to which Notification Should be Sen or similar designation is not acceptable except where it is the only address that can be used in the location): Rox 2, Marrison N 10528 -0002	t (a P.O. Box
Telephone Number of Designated Agent: +\ 914-921-3915  Facsimile Number of Designated Agent: +\ 646-607-149	
Email Address of Designated Agent: Jacob@ Sound Patra	.com
Signate Designating Service Provide Date: 1/1/200	
Typed or Printed Name and Title: JACOB GOLDSTEIN	, CEO
SCANNED 04-16/2008	
Note: This Interim Designation Must be Accompanied by a \$80 Filing	g Fee
Made Payable to the Register of Copyrights.	RECEIVED
Mail the form to:	FEB 1 1 2008
Copyright GC/I&R	COPYRIGHT UPHER
P.O. Box 70400 163622807 Washington, DC 20024	*