

Interim Designation of Agent to Receive Notification  
of Claimed Infringement

Full Legal Name of Service Provider: SKYRIDER INC

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

Address of Service Provider: 201A RAVENDALE DR, MOUNTAIN VIEW, CA 94043

Name of Agent Designated to Receive Notification of Claimed Infringement: COPYRIGHT AGENT

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):

201A RAVENDALE DR, MOUNTAIN VIEW, CA 94043

Telephone Number of Designated Agent: 650-353-5000

Facsimile Number of Designated Agent: 650-694-4899

Email Address of Designated Agent: copyright@projectspin.net

Signature of Officer or Representative of the Designating Service Provider: \_\_\_\_\_  
Date: 10/30/07

Typed or Printed Name and Title: Dr. Cohen Founder

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

SCANNED 11 08 / 2007

Mail the form to:

Copyright GCI&R  
P.O. Box 70400  
Washington, DC 20024



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