Interim Designation of Agent to Receive Notification of Claimed Infringement

Alternative Name(s) of Service Provider (including all names under which the serprovider is doing business): Address of Service Provider: 233 Wilshire Boulevard, Suite 900, Santa Monica, CA 90401	
	which Notification Should be Sent (a P.O. Box ere it is the only address that can be used in the geographic evard, Suite 900
Telephone Number of Designated Age	ent: (310) 451-0647
Facsimile Number of Designated Age	
Email Address of Designated Agent:_	
	ha Danianatina Sandar Danidan
Signat	he Designating Service Provider; Date:

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



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