FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: Ap

3235-0076 April 30, 2008

Estimated average burden hours per response . . . 16.00



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Name of Offerial check if this is an amendment and name has changed, and indicate cha	nge.) /3409// _a
SERIES A PREFERRED STOCK	1010110
Filing Under (Check box(es) that apply): 🔲 Rule 504 🔲 Rule 505 🛛 Rule 506 🗍 Se	ction 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate changed	ge.) HIVE7.COM, INC.
Address of Executive Offices: (Number and Street, City, State, Zip Code) 607 MARKET STREET 3 RD FLOOR, SAN FRANCISCO, CA 94105	Telephone Number (Including Area Code) 415 268 7000
Address of Principal Business Operations: (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) Same	Telephone Number (Melading Area Code)
Brief Description of Business: INTERNET SOFTWARE	
Type of Business Organization	
☐ corporation ☐ limited partnership, already formed ☐ other	(please specify): public limited company
☐ business trust ☐ limited partnership, to be formed	
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual Estimated PROCESED
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation	for State: CA ACT 1 2 2005
CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	IHERISON .
Federal:	, prancial
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regular et seq. or 15 U.S.C. 77d(6).	ation D or Section 4(6), 17 CFR 230.501

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, NE, Washington, DC 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Beneficial Owner □ Executive Officer □ Director General and/or □ Promoter Managing Partner Full Name (Last name first, if individual) SKIBINSKY, MAX (Number and Street, City, State, Zip Code) Business or Residence Address 607 MARKET STREET 3RD FLOOR, SAN FRANCISCO, CA 94107 Check Box(es) that Apply: Beneficial Owner Executive Officer □ Director ☐ General and/or □ Promoter Managing Partner Full Name (Last name first, if individual) **RAVIKANT, NAVAL** Business or Residence Address (Number and Street, City, State, Zip Code) 607 MARKET STREET 3RD FLOOR, SAN FRANCISCO, CA 94107 Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) **JAMAN TREE, LLC** (Number and Street, City, State, Zip Code) Business or Residence Address 607 MARKET STREET 3RD FLOOR, SAN FRANCISCO, CA 94107 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner ☐ Director ☐ General and/or ☐ Promoter ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING								
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								
2. What is the minimum investment that will be accepted from any individual?		• • • • • • • • • • • • • • • • • • • •	N/A					
3. Does the offering permit joint ownership of a single unit?								
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Name of Associated Broker or Dealer		, , , , , , , , , , , , , , , , , , ,	, , ,					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers								
(Check "All States" or check individual States)			All States					
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA]	[HI]	[ID]						
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN]	[MS]	[MO]						
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK]	[OR]	[PA]						
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] Full Name (Last name first, if individual) N/A	[WY]	[PR]						
Turi Name (Dast name mot, it mativiously								
Business or Residence Address (Number and Street, City, State, Zip Code) N/A								
Name of Associated Broker or Dealer N/A								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers								
(Check "All States" or check individual States)			All States					
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA]	[HI]	[ID]						
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK]	[MS] [OR]	[MO] [PA]						
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]	[WY]	[PR]						
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)								

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Enter the aggregate offering price of securities included in this offering and the total amou already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchan offering, check this box \(\square\) and indicate in the columns below the amounts of the securit offered for exchange and already exchanged.	ge	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$200,000	\$200,000
	Common Preferred	\$ <u>2007000</u>	\$ 200,000
	Convertible Securities (including warrants)	\$	\$ -
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$200,000	\$200,000
	Answer also in Appendix, Column 3, if filing under ULOE		-
	Enter the number of accredited and non-accredited investors who have purchased securit in this offering and the aggregate dollar amounts of their purchases. For offerings und Rule 504, indicate the number of persons who have purchased securities and the aggregated dollar amount of their purchases of the total lines. Enter "0" if answer is "none" or "zero.	ler ate	Aggragata
	Investors	Number of Purchases	Aggregate Dollar Amount
	Accredited Investors	2	\$ 200,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE	•	S
	If this filing is for an offering under Rule 504 or 505, enter the information requested for securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (I months prior to the first sale of securities in this offering. Classify securities by type list in Part C - Question 1.	2)	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	Security	ę Solu
	Regulation AN/A		\$ \$
	Rule 504N/A		\$
	Total		\$ \$
4.		ne issuer. The	<u> </u>
	Transfer Agent's Fees		□ \$
	Printing and Engraving Costs		\$
	Legal Fees		⊠ \$ 20,000
	Accounting Fees		\$
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify) Finders' fees		S
	Total		⊠ \$20,000

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND U	SE OF I	ROCEED	S	
	b. Enter the difference between the aggregate off Question 1 and total expenses furnished in resp difference is the "adjusted gross proceeds to the issue."	onse to Part C - Question 4.a. This				\$ 180,000
5.	Indicate below the amount of the adjusted gross probe used for each of the purposes shown. If the furnish an estimate and check the box to the left of listed must equal the adjusted gross proceeds to the Question 4.b above.	amount for any purpose is not known, the estimate. The total of the payments				
				yments to		
			Di	Officers, irectors, &		Payments T
	Salaries and fees		□ s [′]	Affiliates		Others \$
	Purchase of real estate					\$
	Purchase, rental or leasing and installation of n					\$
	Construction or leasing of plant buildings and					\$
	Acquisition of other businesses (including the this offering that may be used in exchange for	the assets or securities of another				•
	issuer pursuant to a merger)					\$
	Repayment of indebtedness					\$
	Working capital					\$180,000
	Other (specify)		. LJ \$		- 🗀	\$
			\$		\$	_
	Column Totals					\$_ <u>·</u>
	Total Payments Listed (column totals added)			⊠ \$ <u>;</u>	180,0	000
	D.	FEDERAL SIGNATURE				
follow	suer has duly caused this notice to be signed by the ing signature constitutes an undertaking by the issue taff, the information furnished by the issuer to any notice.	er to furnish to the U.S. Securities and Exchar	ge Comi	nission, up		
	(Print or Type) 7.COM, INC.	Signature	Date:	Septemb	er Z	℃ _, 2005
	of Signer (Print or Type) SKIBINSKY	Title of Signer (Print of President	i Gil	vsy		
				Q		
		ATTENTION				
Inten	tional misstatements or omissions of fac	<u>ts constitute federal criminal violatio</u>	ns. (Se	e 18 U.S	<u>.C. 1</u>	001.)