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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

D.N. 1 2225 007

OMB APPROVAL

OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden

hours per form.....1

JUL 2 4 2007

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

| SEC | USE ONLY |
|--------|----------|
| Prefix | Serial |
| DATE | RECEIVED |

| 186 STW | | | | | |
|---|---|------------------------|----------------------|----------------------|--------------------|
| Name of Offering (O check if this is an a | mendment and name has changed, a | and indicate change.) | · | | |
| Sale and issuance of Series B preferred | stock and the underlying shares o | f common stock | | | |
| Filing Under (Check box(es) that apply): | ☐ Rule 504 | ☐ Rule 505 | Rule 506 ■ Rule 506 | Section 4(6) | ☐ ULOE |
| Type of Filing: | X | New Filing | | Amendment | |
| | A. BASIC II | DENTIFICATION DA | TA | _ | |
| 1. Enter the information requested about | t the issuer | | | | |
| Name of Issuer (check if this is an amount | endment and name has changed, and | indicate change.) | | | |
| National Banana, Inc. | | | | | |
| Address of Executive Offices | (Number and Street, | City, State, Zip Code) | Telephone Numbe | T 070 | 73236 [—] |
| 924 Colorado Avenue, Santa Monica, C | A 90401 | | (310) 319-3 | 777 | |
| Address of Principal Business Operations (if different from ExecutiveOffices) | (Number and Street, City, State, Zip | Code) | Telephone Numbe | r (Including Area Co | de) |
| (Same as above) | | 07 | 000 | | |
| Brief Description of Business Online media producers | | | OUESSE[| | |
| Type of Business Organization | | 7 10 | L 3 0 2007 | | |
| ⋉ corporation | ☐ limited partnership, already for | | | □ other (please spec | rify): |
| ☐ business trust | ☐ limited partnership, to be forme | ed P | MONSUN | | |
| Actual or Estimated Date of Incorporation | | | WANCIAL 006 | ■ Actual | ☐ Estimated |
| Jurisdiction of Incorporation or Organizat | ion: (Enter two-letter U.S. Postal CN for Canada; FN for other | | | 1 19119111 | DE DE |

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(b)

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, 450 Fifth Street, N.W., Washington, D.C. 2649.

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 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.

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 issues; and
 - Each general and managing partner of partnership issuers.

| Check Box(es) that | Promoter | ■ Beneficial Owner | Executive Officer | ▼ Director | General and/or Managing Partner |
|---|--|---|---|-------------------|-----------------------------------|
| Apply: | 7 10: 11.1 | | | • | |
| • | name first, if individual) | | | | |
| Zucker, Jerry | idence Address (Number and | Street, City, State, Zip Code) | | | |
| | | enue, Santa Monica, CA 9040 |)1 | | |
| Check | Promoter | ■ Beneficial Owner | ☐ Executive Officer | ■ Director | ☐ General and/or |
| Box(es) that Apply: | | | | | Managing Partner |
| Krausz, Steven | name first, if individual) | | | | |
| | idence Address (Number and | | . 0.4035 | | |
| Check Boxes | Promoter | nd Hill Road, Mento Park, C/ Beneficial Owner | Executive Officer | ☑ Director | ☐ General and/or |
| that Apply: | Promoter . | Beneticial Owner | Executive Officer | E Director | Managing Partner |
| Full Name (Last | name first, if individual) | | | | |
| Bettencourt, Ai | <u> </u> | | | ····· | |
| | idence Address (Number and | Street, City, State, Zip Code) ⁄enue, Santa Monica, CA 9040 | 11 | | |
| Check Boxes | Promoter | Beneficial Owner | Executive Officer | ☑ Director | ☐ General and/or |
| that Apply: | - Homotei | El Delleticial Owner | E Executive Officer | La Difettoi | Managing Partner |
| Full Name (Last Rothrock, Ray | name first, if individual) | | • | | |
| | idence Address (Number and S rtners V, L.P., 2494 Sand Hi | Street, City, State, Zip Code) ill road, Suite 200, Menlo Parl | k, CA 94025 | | |
| Check Boxes that Apply: | ☐ Promoter | ☑ Beneficial Owner | ☐ Executive Officer | Director | ☐ General and/or Managing Partner |
| Full Name (Last Venrock Assoc | name first, if individual) | | | | |
| Business or Res | idence Address (Number and | Street, City, State, Zip Code) | | | |
| | Road, Suite 200, Mento Parl | k, CA 94025 | <u>.</u> | | |
| Check Boxes that Apply: | Promoter | ☑ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last U.S. Venture Page 1981) | name first, if individual) artners IX, L.P. | | | | |
| | idence Address (Number and Road, Menlo Park, CA 9402 | | | | |
| Check Boxes that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last | name first, if individual) | | | | |
| Business or Res | idence 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 Res | idence Address (Number and | Street, City, State, Zip Code) | | ****** | |

| | | | | В | . INFORM | IATION AB | OUT OFFI | ERING | | | | |
|-------|--|----------------------------------|-------------------------------|---------------------------------|---|------------------------------|--------------------------------------|------------------|----------------|--------------|------------|------------------|
| 1. | Has the issuer solo | I, or does the iss | suer intend to | | | | | ?g under ULO | | | Yes N | o <u>X</u> |
| 2. | What is the minim | um investment | that will be a | ecepted fro | m any indiv | idual? | | **************** | | | \$ | N/A |
| 3. | Does the offering | permit joint ow | nership of a s | single unit?. | | | | | | | Yes N | o <u>X</u> |
| 4. | Enter the informa solicitation of pur registered with the broker or dealer, y | chasers in cont SEC and/or wi | nection with ith a state or s | sales of sec states, list th | curities in the name of t | he offering. he broker or | If a person | to be listed | is an associat | ed person or | agent of a | broker or dealer |
| N/A | | | | | | | | | | | | |
| Full | Name (Last name t | first, if individua | al) | | | | | | | | | |
| _ | | | | | | | | | | | | |
| Bus | iness or Residence | Address (Numb | er and Street. | , City, State | , Zip Code) | | | | | | | |
| Nan | ne of Associated Br | oker or Dealer | | | | | | | · | | • | |
| | | | | | | | | | | | | |
| Stat | es in Which Person | Listed Has Soli | icited or Inter | nds to Solic | it Purchaser | s | | | | | | |
| (Ch | eck "All States" or | check individua | ıl States) | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | All States |
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| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | IMNI | [MS] | JMOJ |
| IM1 | | ĮΝVJ | [NH] | [[N] | [NM] | NY | INCI | [ND] | [OH] | [OK] | [OR] | [PA] |
| JRIJ | | [SD] | JTNJ | [TX] | [UT] | [VT] | ĮVAJ | ĮVAĮ | [WV] | JWIJ | [WY] | [PR] |
| Full | Name (Last name I | irst, if individu | ai) | | | | | | | | | |
| Bus | iness or Residence | Address (Numb | er and Street. | . City, State | . Zip Code) | | | | | | | |
| | | (******* | | | , r , | | | | | | | |
| Nan | ne of Associated Br | oker or Dealer | | | | | | | | | | |
| Stat | es in Which Person | Listed Has Soli | icited or Inter | nds to Solic | it Puchasers | | | | | | | |
| (Ch | eck "All States" or | check individua | al States) | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | All States |
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| JILJ | [IN] | ĮΙΑΙ | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [M] | [MN] | [MS] | [MO] |
| IMI |] [NE] | INVI | [NH] | [UJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| (RI) | | [SD] | נאדן | ĮTXĮ | เบา | [VT] | [VA] | [VA] | WV | ĮWIĮ | JWYJ | [PR] |
| Full | Name (Last name f | first, if individu | al) | | | | | | | | | |
| Bus | iness or Residence | Address (Numb | er and Street | , City, State | , Zip Code) | | | | | | | |
| Nan | ne of Associated Br | oker or Dealer | | | | | | | | | | _ |
| 11411 | 10 07 7133001ated 157 | one: of Deale: | | | | | | | | | | |
| Stat | es in Which Person | Listed Has Soli | icited or Inter | nds to Solic | it Purchaser | s | | | | | | |
| (Ch | eck "All States" or | check individua | ıl States) | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | ************ | | All States |
| [AL | [AK] | [AZ] | [AR] | [CA] | {CO | [CT] | [DE] | [DC] | [FL] | [GA] | [81] | [ID] |
| [IL] | IIN | [[A] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | JMOJ |
| ĮΜΊ | '] [NE] | [NV] | INHI | נמן | [NM] | [NY] | [NC] | [ND] | ЮН | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | ועדן | [VT] | [VA] | ĮVΑΙ | [WV] | [WI] | [WY] | [PR] |

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 amount already sold. Enter "0" if answer is "none" or "zero." transaction is an exchange offering, check this box 🛘 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Dcbt 3,199,998,96 3,249,997.56 Equity Preferred Common Convertible Securities (including warrants)..... Partnership Interests..... Other (Specify _____) Total 3,199,998.96 \$ 3,249,997.56 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases \$ 3,199,998.96 Accredited Investors \$ Non-accredited Investors Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C- Question 1. Type of Dollar Amount Security Sold Type of Offering Rule 505 Regulation A..... Rule 504 Total..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... Printing and Engraving Costs..... X 30,000.00 Legal Fees Accounting Fees Engineering Fees. Sales Commissions (specify finders' fees separately)

×

30,000.00

Other Expenses (Identify)

Total.....

| C. OFFERING PRICE, NUMBER OF IN | VESTORS, EXPENSES AND USE OF PROCEED | S | - 30 ₁₁₁ |
|--|--|-----------|---------------------|
| Enter the difference between the aggregate offering price given in response to Part C – Question 4.a. This difference is the "adjusted price of the control of | | | 3,219,997,56 |
| Indicate below the amount of the adjusted gross proceeds to the issuer use if the amount for any purpose is not known, furnish an estimate and ch payments listed must equal the adjusted gross proceeds to the issuer set for | eck the box to the left of the estimate. The total of rth in response to Part C- Question 4.b above. | the | |
| | Payment to Office Directors, & Affilia | | Payment To Others |
| Salaries and fees | S | □ s_ | |
| Purchase of real estate | S | | |
| Purchase, rental or leasing and installation of machinery and equipment | <u>s</u> | 🗆 \$_ | |
| Construction or leasing of plant buildings and facilities | | 🗆 s_ | |
| Acquisition of other businesses (including the value of securities involved in the in exchange for the assets or securities of another issuer pursuant to a merger) | | □s | |
| Repayment of indebtedness. | | | |
| Working capital | | | 3,219,997,56 |
| Other (specify): | | | |
| | | | |
| Column Totals. | | | 3,219,997.56 |
| Total Payments Listed (column totals added) | | 3,219,99 | |
| D. FEDE | RAL SIGNATURE | · <u></u> | • |
| The issuer had duly caused this notice to be signed by the undersigned duly aut an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502. | | | |
| 1 | Signature | Date | |
| National Banana, Inc. | Amilh min | July 2 | 23 _, 2007 |
| - 1 | Title of Signer (Prin) d Type) | | |
| Timothy J. Moore, Esq. | Assistant Secretary | | |
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ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | | E. STATE SIGNATURE | | |
|-----|--|---|--------------------------------------|----------------|
| 1. | ls any party described in 17 CFR 230.262 presently subject to | o anyof the disqualification provisions of such rule? | Yes | No K |
| | See . | Appendix, Column 5, for state response. | | |
| 2. | The undersigned issuer hereby undertakes to furnish to the s such times as required by state law. | state administrator of any state in which the notice is | filed, a notice on Form D (17 CFR 2 | .39.500) at |
| 3. | The undersigned issuer hereby undertakes to furnish to any st | tate administrators, upon written request, information: | furnished by the issuer to offerees. | |
| 4. | The undersigned issuer represents that the issuer is familiar (ULOE) of the state in which this notice is filed and understa conditions have been satisfied. | | _ | • |
| Th | e issuer has read this notification and knows the contents to be | e true and has duly caused this notice to be signed o | n its behalf by the undersigned duly | authorized |
| per | son, | | | |
| lss | uer (Print or Type) | Signature | Date | |
| Na | tional Banana, Inc. | South m | July <u>23</u> . | 2007 |
| Na | me of Signer (Print or Type) | Title of Signer (Print or Type) | | |
| - | nothy J. Moore, Esq. | Assistant Secretary | | |

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| Intend to sell to non-accredited investors in State (Part C-ltem 1) | | | | , | lX | APPEND | | | | |
|--|--|--|--------|---------------------------|----------------|------------|---|------------------------------|------------------|-------|
| Intend to sell to non-accredited investors in State (Part B-Hem 1) | 5 | | | | 4 | | 3 | 2 | | 1 |
| Accredited Investors Accredited Investors | ate ULOE (i! , attach ion of waiver | Disqualification under State ULOE yes, attach explanation of waiv granted (Part E-Ho | | amount purchased in State | | | and aggregate offering price offered in state | i-accredited ors in State | to non invest | |
| AK AZ AR CA X Series B Preferred Stock- S3,199,998.96 CO CT DE DC FL GA HI ID IL IN IN IA KS KY LA ME MD MA | No | <u>. </u> | Amount | Non- Accredited | Amount | Accredited | | No | Yes | State |
| AZ AR CA X Series B Preferred Stock - \$3,199,998,96 CO CT DE DC FL GA HI ID IL IN IN IA KS KY LA ME MD MA | | | | | | | | | | AL |
| AR CA X Series B Preferred Stock - S1,199,998.96 CO CT DE DC FL GA HI IID IIL IN IA KS KY LA ME MD MA | | | | | | | | | | AK |
| CA | | | | | | | | | | AZ |
| Stock - S3,199,998.96 CO | | | | | | | | | | AR |
| CT DE DC C FL GA HI ID IL IN IA KS KY LA ME MD MA MA | X | | 0 | 0 | \$3,199,998.96 | 7 | Stock - | X | | CA |
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APPENDIX Type of security and aggregate Disqualification under State ULOE (if yes, Intend to sell to non-accredited offering price Type of investor and attach explanation of waiver granted (Part Einvestors in State offered in state amount purchased in State (Part C-Item 1) (Part C-Item 2) Item 1) (Part B-Item 1) Yes No Number of Amount Number of Amount Yes No State Accredited Non-Accredited Investors Investors MT NE ΝV NH NJ NM NY NC ND HO OK OR PA RI SC SD TN TX UT VT VA W۸ WV W] WY PR

END