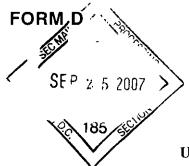
1403386



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 ORM LIMITED OFFERING EXEMPTION

| - | 1, |                  |           |
|---|----|------------------|-----------|
|   |    | OMB APPR         | OVAL      |
|   |    | OMB Number:      | 3235-0076 |
|   |    | Expires:         |           |
|   |    | Estimated averag | je burden |

| SEC L  | JSE ONLY |
|--------|----------|
| Prefix | Serial   |
|        |          |
| DATE   | RECEIVED |
|        |          |

hours per response. . . . . 16.00

| UN  | VIFORM LIMITED OFFERING EXEM   | PTION   |
|---|--|---|
| Name of Offering ( check if this is an  | amendment and name has changed, and indicate change.)  | PROCES  |
| Filing Under (Check box(es) that apply):  Type of Filing:                               | Rule 504 Rule 505 Rule 506 Section 4(6)  |   |
|   | A. BASIC IDENTIFICATION DATA   | -THOMSO   |
| 1. Enter the information requested about  | the issuer   | FINANCIA  |
| Name of Issuer ( check if this is an am-  | endment and name has changed, and indicate change.)  |   |
| ENTERCONNECT INC.   |  |   |
| Address of Executive Offices  | (Number and Street, City, State, Zip Code)   | Telephone Number (Including Area Code)  |
| 100 Century Center Court, Suite 650,  | San Jose, California 95112   | (408) 441-9500  |
| Address of Principal Business Operations<br>(if different from Executive Offices)       | (Number and Street, City, State, Zip Code)   | Telephone Number (Including Area Code)  |
| Brief Description of Business   |  |   |
| SOFTWARE SERVICES   |  |   |
|   |  |   |
| Type of Business Organization   | limited partnership, already formed other (  | please specify):  |
| corporation business trust  | limited partnership, arready formed other (  | 07078780  |
|   |  |   |
| Actual or Estimated Date of Incorporation o   | Month Year<br>r Organization: 111 016 ☑ Actual ☐ Esti  | mated   |
|   | n: (Enter two-letter U.S. Postal Service abbreviation for State  |   |
|   | CN for Canada; FN for other foreign jurisdiction)  |   |
| GENERAL INSTRUCTIONS  | ,  | <del></del>   |
| Federal:<br>Who Must File: All issuers making an offerin<br>77d(6).                     | ng of securities in reliance on an exemption under Regulation D  | or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.  |
| and Exchange Commission (SEC) on the ear  | ter than 15 days after the first sale of securities in the offering<br>lier of the date it is received by the SEC at the address given by<br>United States registered or certified mail to that address.                           |   |
| Where To File: U.S. Securities and Exchange   | ge Commission, 450 Fifth Street, N.W., Washington, D.C. 20   | 0549.   |
| Copies Required: Five (5) copies of this not photocopies of the manually signed copy or | tice must be filed with the SEC, one of which must be manual bear typed or printed signatures.   | ly signed. Any copies not manually signed must l  |
|   | ontain all information requested. Amendments need only repo<br>and any material changes from the information previously supp   |   |
| Filing Fee: There is no federal filing fee.   |  |   |
| ULOE and that have adopted this form. Is are to be, or have been made. If a state rec   | te on the Uniform Limited Offering Exemption (ULOE) for some such a such a separate notice with the squires the payment of a fee as a precondition to the claim for filled in the appropriate states in accordance with state law. | Securities Administrator in each state where sale<br>or the exemption, a fee in the proper amount sha |
|   | ATTENTION —  |   |
|   | riate states will not result in a loss of the federal e<br>result in a loss of an available state exemption unle   |   |

#### A. BASIC IDENTIFICATION DATA 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. Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Jankovich, Sam Business or Residence Address (Number and Street, City, State, Zip Code) 100 Century Center Court, Suite 650, San Jose, California 95112 General and/or Check Box(es) that Apply: Promoter Director Managing Partner Full Name (Last name first, if individual) Wainstein, Michael Business or Residence Address (Number and Street, City, State, Zip Code) 1500 Broadway, Suite 2003, New York, New York 10036 Check Box(es) that Apply: Promoter ▼ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Galland, Dean Business or Residence Address (Number and Street, City, State, Zip Code) 18713 Metler Court, Saratoga, California 95070 Check Box(es) that Apply: General and/or Beneficial Owner Executive Officer Promoter ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: General and/or Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Beneficial Owner Executive Officer Director Promoter 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)

|         |                                    |  |  |  | B. 11  | NFORMATI                                     | ON ABOU                                     | t offeri                                     | NG  |   |                              |          |                |
|---------|------------------------------------|--|--|--|--|--|---|--|---|---|------------------------------|----------|----------------|
| 1.      | Has the                            | issuer sold                                    | , or does th   | ne issuer ir                               | ntend to sel                                 | ll, to non-a                                 | ccredited is                                | nvestors in                                  | this offeri                                 | ng?                                     |                              | Yes      | No<br><b>₩</b> |
|         |                                    |  | ,  |  | wer also in                                  |  |   |  |   |   |                              |          |                |
| 2.      | What is                            | the minim                                      | um investm   | ent that w                                 | vill be acce                                 | pted from a                                  | ny individ                                  | ual?   |   |   |                              | \$100    | ,000.00        |
|         |                                    |  |  |  |  |  |   |  |   |   |                              | Yes      | No             |
| 3.      |                                    |  | ermit joint  |  |  |  |   |  |   |   |                              | ×        |                |
| 4.      | commiss<br>If a perso<br>or states | sion or simi<br>on to be list<br>, list the na | ion request<br>ilar remune<br>ted is an ass<br>me of the b<br>you may so | ration for s<br>sociated pe<br>roker or de | solicitation<br>erson or age<br>ealer. If mo | of purchase<br>nt of a brok<br>ore than five | ers in conne<br>er or deale<br>e (5) person | ection with<br>r registered<br>is to be list | sales of sec<br>I with the S<br>ed are asso | curities in t<br>EC and/or              | he offering.<br>with a state | ,<br>;   |                |
|         | •                                  |  | first, if indi<br>DVISORY  | ,  | LLC  |  |   |  |   |   |                              |          |                |
|         |                                    |  | Address (N   |  |  | ty, State, Z                                 | ip Code)                                    |  | •   |   |                              |          |                |
| 355     | LEXING                             | TON AVE  | NUE, 8TH   | FLOOR, I                                   | NEW YOR                                      | K, NEW Y                                     | ORK 1001                                    | 17   |   |   |                              |          |                |
|         |                                    |  | oker or Dea  | aler                                       |  |  |   |  |   |   |                              |          |                |
|         | chael rule                         | _  | Listed Has   | Solicited                                  | or Intends                                   | to Solicit l                                 | Purchasers                                  |  |   |   |                              |          |                |
| 0112    |                                    |  | " or check   |  |  |  |   |  | ******************                          | *******************************         |                              | ☐ All    | l States       |
|         | AAL                                | AK   | [A/Z]  | AR   | C/A  | ( <b>C</b> O)                                | [ <b>\( \sigma \)</b>                       | DE   | DC  | EL                                      | GA                           | <b>₩</b> | Ψ.             |
|         | <b>K</b>                           | IN   | IA   | KS   | KY   | LA   | ME  | MD   | MA  | MI                                      | MN                           | MS       | MO             |
|         | MT                                 | NE   | NV   | MH   | D)J  | NM   | NY  | NC   | ND  | QH                                      | OK                           | CAR      | PA             |
|         | ₽⁄I                                | SC   | [SD]   | [JM]                                       | TX   | [TU]   | VT  | VA   | WA  | [WV]                                    | WI                           | WY       | PR             |
| Ful     | l Name (I                          | ast name i                                     | first, if indi   | ividual)                                   |  |  |   |  |   |   |                              |          |                |
| Bu      | siness or                          | Residence                                      | Address (N   | Number an                                  | d Street, C                                  | ity, State, 2                                | Zip Code)                                   |  |   |   |                              |          | ·              |
| Na      | me of Ass                          | ociated Br                                     | oker or Dea  | aler                                       |  |  |   |  |   |   |                              |          |                |
| <u></u> | . ' ****                           | ' 1 75   | Y * . 1 YY   |  |  | . 0.11.11.1                                  |   |  |   |   |                              |          |                |
| Sta     |                                    |  | Listed Has<br>" or check   |  |  |  |   |  |   |   |                              | - A1     | l States       |
|         | (Check                             | All States                                     | or check   | maividuai                                  | i States)                                    | •••••  |   |  |   | *************************************** | ••••••                       | ∐ Ai     | 1 States       |
|         | AL                                 | AK   | AZ   | AR   | CA   | CO   | CT  |  |   |   | GA                           | HI       | ID             |
|         | IL<br>MT                           | IN<br>NE                                       | IA NV  | KS<br>NH                                   | KY   | LA   | ME<br>NY                                    | MD   | MA<br>ND                                    | MI<br>OH                                | MN<br>OK                     | MS<br>OR | MO<br>PA       |
|         | RI                                 | SC   | NV SD  | TN   | NJ<br>TX                                     | NM<br>UT                                     | VT  | NC<br>VA                                     | WA  | WV                                      | WI                           | WY       | PR             |
| Ful     |                                    |  | first, if indi   |  |  |  |   |  |   |   |                              |          |                |
|         | (-                                 |  | <b>,</b>   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,    |  |  |   |  |   |   |                              |          |                |
| Bu      | siness or                          | Residence                                      | Address (N   | Number an                                  | d Street, C                                  | ity, State, 2                                | Zip Code)                                   |  |   |   |                              |          |                |
| Na      | me of Ass                          | ociated Br                                     | oker or Dea  | aler                                       |  |  |   |  |   |   |                              |          |                |
| Sta     | tes in Wh                          | ich Person                                     | Listed Has   | Solicited                                  | or Intends                                   | to Solicit l                                 | Purchasers                                  |  |   |   |                              |          |                |
|         | (Check '                           | 'All States                                    | " or check   | individual                                 | l States)                                    |  |   |  |   |   | •••••                        | ☐ Al     | l States       |
|         |                                    |  | [A 7]  | AD   | CA   | CO   | CT  | DE   | DC]   | FL                                      | GA                           | HI       | ID             |
|         | AL                                 | AK   | AZ   | AR   |  |  |   |  |   |   |                              |          |                |
|         | AL<br>IL<br>MT                     | IN<br>NE                                       | IA<br>NV   | KS<br>NH                                   | KY<br>NJ                                     | LA<br>NM                                     | ME<br>NY                                    | MD<br>NC                                     | MA<br>ND                                    | MI<br>OH                                | MN<br>OK                     | MS<br>OR | MO<br>PA       |

(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

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check   |                             |                                      |
|----|--|-----------------------------|--------------------------------------|
|    | this box and indicate in the columns below the amounts of the securities offered for exchange and  |                             |                                      |
|    | Type of Security   | Aggregate<br>Offering Price | Amount Already<br>Sold               |
|    | Debt   | 0.00                        | s 0.00                               |
|    | Equity   | 0.00                        | <u> </u>                             |
|    | ✓ Common Preferred   | Ψ                           | <u> </u>                             |
|    | Convertible Securities (including warrants)  | <b>c</b> 2,112,732.00       | 2,112,732.00                         |
|    | Partnership Interests  |                             | s 0.00                               |
|    | Other (Specify)  |                             | s 0.00                               |
|    | Total  | 2,112,732.00                |                                      |
|    | Answer also in Appendix, Column 3, if filing under ULOE.   | Φ                           | <u> </u>                             |
| 2. | ••   |                             |                                      |
| 2. | 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<br>Investors         | Aggregate Dollar Amount of Purchases |
|    | Accredited Investors   | 51                          | <u>\$ 2,112,732.00</u>               |
|    | Non-accredited Investors   | 0                           | \$_0.00                              |
|    | Total (for filings under Rule 504 only)  |                             | \$_2,112,732.00                      |
|    | Answer also in Appendix, Column 4, if filing under ULOE.   |                             |                                      |
| 3. | 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 Offering   | Type of<br>Security         | Dollar Amount<br>Sold                |
|    | Rule 505   |                             | \$                                   |
|    | Regulation A   |                             | \$                                   |
|    | Rule 504   |                             | \$                                   |
|    | Total  |                             | \$_0.00                              |
| 4  | 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 insurer. 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  |                             | \$_4,000.00                          |
|    | Printing and Engraving Costs   |                             | \$_2,000.00                          |
|    | Legal Fees   |                             | \$ 20,000.00                         |
|    | Accounting Fees  | _                           | \$_0.00                              |
|    | Engineering Fees   | _                           | \$ 0.00                              |
|    | Sales Commissions (specify finders' fees separately)   | _                           | s 211,273.20                         |
|    | Other Expenses (identify)  | _                           | § 0.00                               |
|    | Total  |                             | \$ 237,273.20                        |

|      | C. OFFERING PRICE, NUM  | BER OF INVESTORS, EXPENSES AND USE OF P  | ROCEEDS  |   |
|------|---|--|--|---|
|      | b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."   |  |  | \$1,875,458.80                                  |
| 5.   | Indicate below the amount of the adjusted gross pro-<br>each of the purposes shown. If the amount for an<br>check the box to the left of the estimate. The total of<br>proceeds to the issuer set forth in response to Part | y purpose is not known, furnish an estimate and<br>the payments listed must equal the adjusted gross |  |   |
|      |   |  | Payments to<br>Officers,<br>Directors, &<br>Affiliates | Payments to<br>Others                           |
|      | Salaries and fees   | [  | \$ 250,000.00  | \$ 167,612.00                                   |
|      | Purchase of real estate   | [  | \$ 0.00  | ss  |
|      | Purchase, rental or leasing and installation of mac and equipment   | hinery<br>[  | s0.00  | s   |
|      | Construction or leasing of plant buildings and fac-   |  |  | \$ 0.00   |
|      | Acquisition of other businesses (including the val-<br>offering that may be used in exchange for the asse<br>issuer pursuant to a merger)   | ts or securities of another  | \$ <u></u>   | \$_1,055,264.00                                 |
|      | Repayment of indebtedness   |  |  | \$ <u></u>                                      |
|      | Working capital   | [  | \$ 0.00  | <u> </u>  |
|      | Other (specify): Research and Development   |  | \$_0.00  | \$ <u>231,642.00</u>                            |
|      |   | ······[  | \$   | \$  |
|      | Column Totals   | [  | \$_250,000.00  | \$1,454,518.0                                   |
|      | Total Payments Listed (column totals added)   |  | □ \$ <u>1,7</u>  | 704,518.00                                      |
|      |   | D. FEDERAL SIGNATURE   |  |   |
| sig  | e issuer has duly caused this notice to be signed by the<br>nature constitutes an undertaking by the issuer to fur<br>information furnished by the issuer to any non-acci   | nish to the U.S. Securities and Exchange Commis  | sion, upon writter                                     | e 505, the following<br>a request of its staff, |
| Issi | uer (Print or Type)   | Signature  | Date   |   |
| E١   | ITERCONNECT INC.  | 1 Confund  | August , 2007  |   |
| Na   | me of Signer (Print or Type)  | Title of Signer (Print or Type)  |  |   |
| Sar  | n Jankovich   | Chief Executive Officer  |  |   |

- ATTENTION -

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

|          |   | E. STATE SIGNAT             | TURE                      |                         |           |                |
|----------|---|-----------------------------|---------------------------|-------------------------|-----------|----------------|
| 1.       | Is any party described in 17 CFR 230.262 pre provisions of such rule?   |                             | •                         |                         | Yes       | No<br><b>₩</b> |
|          | See .   | Appendix, Column 5, for     | state response.           |                         |           |                |
| 2.       | The undersigned issuer hereby undertakes to fu<br>D (17 CFR 239.500) at such times as required  |                             | strator of any state in v | vhich this notice is fi | iled a no | tice on Form   |
| 3.       | The undersigned issuer hereby undertakes to issuer to offerees.   | furnish to the state admir  | nistrators, upon writte   | en request, informat    | ion furn  | ished by the   |
| 4.       | The undersigned issuer represents that the iss<br>limited Offering Exemption (ULOE) of the sta<br>of this exemption has the burden of establish | ate in which this notice is | filed and understand:     |                         |           |                |
|          | ter has read this notification and knows the conte<br>thorized person.  | nts to be true and has duly | caused this notice to b   | oe signed on its beha   | lf by the | undersigned    |
| Issuer ( | Print or Type)  | Signature                   | 11                        | Date                    |           |                |
| ENTER    | CONNECT INC.  | Som La                      | les 1                     | August <b>3</b> 0, 2007 | ,         |                |
| Name (I  | Print or Type)  | Title (Print of Type)       |                           |                         |           |                |

Chief Executive Officer

#### Instruction:

Sam Jankovich

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.

|       |                                      |   |  | AJ   | PPENDIX      |  |        |   |         |
|-------|--------------------------------------|---|--|--|--------------|--|--------|---|---------|
| 1     | Intend<br>to non-a<br>investor       | 2<br>I to sell<br>ccredited<br>s in State<br>-Item 1) | Type of security<br>and aggregate<br>offering price<br>offered in state<br>(Part C-Item 1) | Type of investor and amount purchased in State (Part C-Item 2) |              |  |        | 5 Disqualificat under State UI (if yes, attac explanation waiver grant (Part E-Item |         |
| State | Yes                                  | No  |  | Number of<br>Accredited<br>Investors                           | Amount       | Number of<br>Non-Accredited<br>Investors | Amount | Yes   | No      |
| AL    |                                      |   |  |  |              |  |        |   |         |
| AK    |                                      |   |  |  |              |  |        |   |         |
| AZ    |                                      |   |  |  |              |  |        |   |         |
| AR    |                                      |   |  |  |              | i  |        | ***************************************   |         |
| CA    |                                      | ×   | Debt \$130,000.00  | 2  | \$13,000.00  | 0  | \$0.00 | 9   | ×       |
| co    |                                      |   |  |  |              |  |        |   |         |
| СТ    |                                      | ×   | Debt \$200,000   | 1  | \$250,000.00 | 0  | \$0.00 | 200000000000000000000000000000000000000   | *       |
| DE    |                                      |   |  |  |              |  |        |   | ,       |
| DC    |                                      |   |  |  |              |  |        |   |         |
| FL    |                                      |   |  |  |              |  |        |   |         |
| GA    |                                      |   |  |  |              |  |        |   |         |
| ні    |                                      | ×   | Debt \$25,000.00   | 1  | \$25,000.00  |  |        |   | ×       |
| ID    | <u> </u>                             | ×   | Debt \$75,000.00   | 1  | \$75,000.00  |  |        | ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;  | ×       |
| IL    |                                      | ×   | Debt \$200,000.00  | 2  | \$200,000.00 |  |        |   | ×       |
| IN    | ,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |   |  |  |              |  |        |   |         |
| IA    |                                      | 5-00-00-00-00-00-00-00-00-00-00-00-00-00              |  |  |              |  |        |   |         |
| KS    |                                      |   |  |  |              |  |        |   |         |
| KY    | Transcolotiones contituted           | Sagara  |  |  |              |  |        |   | <u></u> |
| LA    |                                      |   |  |  |              |  |        |   |         |
| ME    |                                      |   |  |  |              |  |        |   |         |
| MD    |                                      | ×   |  |  |              |  |        |   | ×       |
| MA    |                                      | ×   | Debt \$50,000.00   | 1  | \$50,000.00  |  |        |   |         |
| МІ    |                                      |   |  |  |              |  |        |   |         |
| MN    |                                      | ×   |  |  |              |  |        |   | ×       |
| MS    |                                      |   |  |  | <u></u>      |  |        |   |         |

| Intend to sell to non-accredited investors in State (Part B-Item 1)  State Yes No No Number of Accredited Investors Amount Processors Processor | Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) |
|--|--|
| State Yes No Accredited Investors Amount Non-Accredited Investors Amount MT  | ount Yes No  |
| MT   | 900000000000000000000000000000000000000  |
| MT No.   |  |
| NE NE  |  |
|  |  |
| NV   |  |
| NH   |  |
| NJ × Debt \$180,000.00 3 \$50,000.00   |  |
| NM   |  |
| NY   | ×  |
| NC   |  |
| ND   |  |
| OH   |  |
| OK STATE OF THE ST |  |
| OR   |  |
| PA PA  |  |
| RI X Debt \$25,000.00 1 \$25,000.00  |  |
| SC X Debt \$200,000.00 1 \$200,000.0   |  |
| SD   |  |
| TN   |  |
| TX Debt \$50,000.00 2 \$50,000.00  |  |
| UT   |  |
| VT   |  |
| VA X   | ×  |
| WA WA  |  |
| wv   |  |
| WI WI  |  |

| 1        | to non-a investor                       | 2<br>I to sell<br>accredited<br>as in State | Type of security and aggregate offering price offered in state | APPENDIX  4  Type of investor and amount purchased in State (Part C-Item 2) |        |                                    | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) |     |    |
|----------|---|---|--|---|--------|------------------------------------|--|-----|----|
| State    | Yes                                     | No  | (Part C-Item 1)  | Number of<br>Accredited<br>Investors  | Amount | Number of Non-Accredited Investors | Amount   | Yes | No |
| WY<br>PR | 200000000000000000000000000000000000000 | ***************************************     |  |   |        |                                    |  |     |    |

