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

NIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:						
Expires:						
Estimated average burden hours per response						

SEC	USE ONLY
Prefix	Serial
DATI	E RECEIVED
[	

					<u> </u>	
	if this is an amendment and nam		cate change.)		WAIL	73
Filing Under (Check box(es)	that apply):	☐ Rule 505	⊠ Rule 506	☐ Se	ction 4(6) SEO 6EO	IVEO C
Type of Filing:	New Filing	Amendment			OCT 10	1201
		A. BASIC IDENT	IFICATION DA	ľA	1997	2007
1. Enter the information requ	ested about the issuer				186	MON
Name of Issuer ( check if )	this an amendment and name has	changed, and indicate of	:hange.)		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	SECILE
Data Storage Software	e Lab, Inc.	-				
Address of Executive Offices	(Nun	ber and Street, City, Sta	ite. Zip Code)		Telephone Number Unclud	ling Area Code)
2688 Middlefield Road	I, Suite A Red	wood City, CA 940	63	ļ (	(925) 9 <u>15-1677</u>	
Address of Principal Busines	s Operations (Number and Stree	t. City State, Zip Code)			l'elephone Number (Includ	ling Area Code)
(if different from executive C	Offices					
Brief Description of Business	3					
Software Distributor						PROCESSED
Type of Business Organization	OH .				· · · · · · · · · · · · · · · · · · ·	OCT 1 E nors
	ited partnership, already formed	other (please s	pecify):			OCT 1 5 2007
	ited partnership, to be formed					- F1-60-000A
			Month	Year		THOMSON
Actual or Estimated date of I	ncorporation or Organization:				🖾 Actual 🔲 Estima	ned FINANCIAL
			0 5	0 6	[	
1. 2. 15.47 0. 201	(Name and heart) and office an early of the		harriation Con Con		D   E	
Juristiction of incorporation	or Organization: (Enter two-lette CN for Canad	er 0.8. Postal Service an la: FN for other foreign i		ic,		

## 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. 77406)

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. 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.

	A. BAS	IC IDENTIFICATION	N DATA	
<ul> <li>2. Enter the information requested for the I</li> <li>Each promoter of the issuer, if the issue.</li> <li>Each beneficial owner having the pow</li> <li>Each executive officer and director of</li> <li>Each general and managing partner of</li> </ul>	uer has been organized we wer to vote or dispose, or a corporate issuers and of	direct the vote or dispos	ition of, 10% or	more of a class of equity securities of the issuer: s of partnership issuers: and
Check Box(es) that Apply:  Promoter	⊠ Beneficial Owner			General and/or Managing Partner
Full Name (Last name first, if individual)				
Franek, Krzysztof M.				
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)		
2688 Middlefield Road, Suite A, Red	wood City, CA 94063			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)	· · · · · · · · · · · · · · · · · · ·		•	
White, Mark Cameron				
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)		
545 Middlefield Road, Suite 250, Mer	nio Park, CA 94025			
Check Box(es) that Apply: Promoter	Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Bak, Janusz				
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)		
2688 Middlefield Road, Suite A, Red	wood City, CA 94063			
Check Box(es) that Apply:	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Franek, Miroslaw				
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)		
2688 Middlefield Road, Suite A, Red	wood City, CA 94063			
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 a	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)		

•						B. INFO	RMATIO	N ABOU	r offer	ING					<del></del>
									<u> </u>					Yes	No
1.	Has the issu	er sold, or	does the i	ssuer inter	nd to sell.	to non-acc	redited in	vestors in	this offeri	ng?				🔲	$\boxtimes$
					Answe	r also in A	ppendix. (	Column 2.	if filing u	nder ULO	E.				
2.	What is the	minimum	investmen	t that will	he accept	ed from ar	y individ	ual?						\$ <u>388</u>	<u>,596.06</u>
														Yes	No
3.	Does the off													🛛	
4.	Enter the inf similar reme associated p dealer. If me for that brok	ineration f erson or a ore than fiv	or solicita gent of a b ve (5) pers	tion of pu roker or d	rchasers ir lealer regis	r connection stered with	on with sa' the SEC	les of secu and/or wit	rities in th h a state o	e offering r states, li	. If a perso st the nam	on to be lis ie of the br	sted is an oker or		
Ful	l Name (Last	name first.	if individ	ual)											
N/A	<u> </u>														
Bus	siness or Resid	lence Add	ress (Num	iber and S	treet. City	. State, Zij	Code)								
Nai	me of Associa	ted Broker	r or Dealer	-											
Sta	tes in Which I	Person Lis	ted Has So	olicited or	Intends to	Solicit Pu	rchasers								
	neck "All State													🔲 AI	l States
(	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
		[IN]	нај	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[MT]	INEL	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	{VT}	[VA]	[WA]	įwvį	[WI]	[WY]	[PR]		
Ful	l Name (Last	name first	. if individ	ual)											
Bus	siness or Resid	dence Add	ress (Nun	iber and S	treet, City	, State, Zip	Code)								
Nai	me of Associa	ted Brókei	r or Dealer	<u> </u>		<u>.</u>							<u> </u>		
Sta	tes in Which I	Person Lis	ted Has Sc	olicited or	Intends to	Solicit Pu	rchasers							<del></del>	
(Cl	ieck "All State	es" or chec	k individu	ial States)										🔲 AI	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[141]	[ID]		
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[MT]	[NE]	INVI	[NH]	INII	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
	[RI]	[SC]	[SD]	[IN]	[TX]	լՄԴ	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Ful	l Name (Last	name first.	if individ	ual)											
Bus	siness or Resid	lence Add	ress (Num	ber and S	treet, City	, State. Zip	Code)								
Nai	me of Associa	ted Broker	or Dealer	<u>.</u>						<del>.</del>					
											- <del>-</del> -				
	tes in Which I														_
(CF	ieck "All State													🔲 Al	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[IL]	[NI]	[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]	TNI	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	INOCE	LUJ	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if an answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security	Aggre Offerin		Amount Already ce Sold
	Debt		-	\$
	Equity			
	Equity  Common 🔀 🗋 Preferred	a <u></u> 9.	<u> </u>	σ σ σ,υν2.σσ
	Convertible Securities (including warrants)	<b>\$5.491</b>	437 1	2 \$5,491,437.12
				<del></del>
	Partnership Interests			
	Other (Specify)			
	Total	\$ <u>5,500.</u>	000.00	0 \$5,500,000,00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering an 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" answer is "none" or "zero."	i		Aggregate Dollar Amount Of Purchases
	Accredited Investors	2		\$ 5,500,000.00
	Non-accredited Investors		)	<u> </u>
	Total (for filings under Rule 504 only)		 J/A	
	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.			<b>.</b>
	Type of Offering	Type Securi		Dollar Amount Sold
	Rule 505		•	\$_N/A
	Regulation A			\$ N/A
	Rule 504			\$_N/A
	Total			
	Total	***		_ <u> </u>
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 issuer. The information may be give subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees		$\boxtimes$	\$ 200,000.00
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			\$
	1		12	

	C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENSES	SAND	USE OF P	ROCEED	)S
	b. Enter the difference between the aggregate offering p furnished in response to part C – Question 4.a. This diff	orice given in response to Part C –				
S	ndicate below the amount of the adjusted gross proceeds to hown. If the amount for any purpose is not known, furnish a otal of the payments listed must equal the adjusted gross probove.	an estimate and check the box to the	ie left	of the estima	ite. The	
			_	Payments Officers Directors Affiliate	5, , & es	Payments To Others
	Salaries and fees			\$		<u> </u>
	Purchase of real estate					□ \$
	Purchase, rental or leasing and installation of machinery	y and equipment		\$		<b>S</b>
	Construction or leasing of plant buildings and facilities			\$		□ \$
	Acquisition of other businesses (including the value of sthat may be used in exchange for the assets or securities merger)	s of another issuer pursuant to a		\$		<u> </u>
	Repayment of indebtedness					S
	Working capital (and start-up expenses)			\$		∑ \$ <u>5.300.000.00</u>
				\$		S
	Column Totals		_			\$ 5.300,000.00
	Total Payments Listed (column totals added)			×	\$_5,300	00.000,0
	D. FEDERAL	SIGNATURE				
gnat	suer has duly caused this notice to be signed by the undersigned constitutes an undertaking by the issuer to furnish to the nation furnished by the issuer to any non-accredited investor	U.S. Securities and Exchange Co	mmiss	sion, upon wi	der Rule 5 ritten requ	505, the following test of its staff, the
suer	(Print or Type)	Signature /			Date	
ata	Storage Software Lab, Inc.	Fr. Meire		<u> </u>	Octobe	r <u>5</u> , 2007
	of Signer (Print or Type)	Title of Signer (Print or Type)				
ame	sztof M. Franek	President				

ATTENTION

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

•	E. STATE SIGNATURE							
I. Is any party described in 17 CFR	230.252 ©. (d), (e) or (f) presently subject to any of the disqualif	ication provisions Yes No						
	of such a rule?							
	See Appendix, Column 5, for state response	•						
<ol> <li>The undersigned issuer hereby un D (17 CFR 239,500) at such times</li> </ol>	dertakes to furnish to any state administrator of any state in which as required by state law.	this notice is filed, a notice on Form						
<ol> <li>The undersigned issuer hereby un to offerees.</li> </ol>	dertakes to furnish to the state administrators, upon written reques	st, information furnished by the issuer						
Offering Exemption (ULOE) of the	that the issuer is familiar with the conditions that must be satisfied as state in which this notice is filed and understands that the issued lishing that these conditions have been satisfied.	ed to be entitled to the Uniform Limited relaiming the availability of this						
The issuer has read this notification an authorized person.	d knows the contents to be true and has duly caused this notice to	be signed on its behalf by the undersigned duly						
ssuer (Print or Type)	Signature ///	Date						
Data Storage Software Lab, Inc.	Hoper -	October <u>5</u> , 2007						
Name (Print or Type)	Title (Print or Type)							

President

# Instruction:

Krzysztof M. Franck

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

•	•			AF	PENDIX				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security offering price offered in state (Part C-Item 1)		Type of i amount pur (Part (	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E- Item 1)			
State	Yes	No	Convertible Notes & Common Stock \$5,500,000.00	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
CO	,								
СТ				-					
DE				•					
DC					<u> </u>				
FL,									
GA						"			
FII	•								
ID									
II.									
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IA									
KS	<del></del>								
KY	•								
LA		<del> </del>		· · · · · ·					
ME				<del></del>				<del></del>	
MD									
MA		X		2	\$5,500,000	0			0
MI									
MN							-		
MS					-				
MO	:				-				
MT	****				1				
NE									
NV		<u> </u>							

	<del>-</del>		·	AP	PENDIX		· <u>··</u> ·		
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security offering price offered in state (Part C-Item 1)		Type of amount pur	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E- Item 1)			
State	Yes	No	Convertible Notes & Common Stock \$5,500,000.00	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NH									
NJ									
NM									
NY									
NC								<u> </u>	
ND									
OH									
OK									
OR									
PA									
RI	<del></del>								
SC			· · · · · · · · · · · · · · · · · · ·						
SD									
TN		<u> </u>		·					
TX									
UT	-								
VT									
VA				······				-	
WA									
WV									
WI									
WY									
PR				<del></del>					

