## FORM D

SEC 1972 (6-02)

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

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OMB APPP	
OMB Number:	3235-0076
Expires: July Estimated average	31.2008
hours per respon	se 16.00

SEC USE ONLY						
Prestix	Serial					
DATE RE	CEIVED					
1_						
SEC						

	<u>5cv</u>
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	Mail Processing
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE Section
Type of Filing:	AUG n 1 2008
A. BASIC IDENTIFICATION DATA	
I. Enter the information requested about the issuer	Weshkapton, DC
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	101
BrandAmerica, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3237 Adams Avenue, Sair Diego, CA 92110	19) 528-2953 Telephone Number (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)	Tetephone runner (menanig yard code)
Brief Description of Business PROCESS	ED IMPRESE
assisting American companies in expanding into Asian markets	
AUG 0 8 200	8 <del>- レ</del>
Type of Business Organization    Corporation   limited partnership, already formed   Cother (please)	se specify):
corporation limited partnership, already formed business trust limited partnership, to be formed THOMSON REL	JTERS 08055964
Month Year	
Actual or Estimated Date of Incorporation or Organization: [0]3 [0]2 Actual Estimat lurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	ed (CIA)
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or \$774(6).	
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given belo which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities ow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2054	9.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually sphotocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied not be filed with the SEC.	the name of the issuer and offering, any changes d in Parts A and B. Part E and the Appendix need
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 sale ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Sea are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the accompany this form. This notice shall be filed in the appropriate states in accordance with state law. It is notice and must be completed.	he exemption, a fee in the proper amount shall
Failure to file notice in the appropriate states will not result in a loss of the federal exe appropriate federal notice will not result in a loss of an available state exemption unless filing of a federal notice.	emption. Conversely, failure to file the such exemption is predictated on the

Persons who 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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Γ		- 4	٠.			A. BASIC IDE	וודא	ICATION DATA			
2.											
Ch	eck Box(es	) that Apply:		Promoter	Ø	Beneficial Owner	Ø	Executive Officer	Ø	Director	General and/or Managing Partner
_	II Name (L adak, Mic	ast name first, hael	if indi	vidual)					•		
		esidence Addr is Avenue, S				, City, State, Zip Co	dc)				
Ch	eck Box(e	s) that Apply:		Promoter	Ø	Beneficial Owner	Ø	Executive Officer	Ø	Director	General and/or Managing Partner
	II Name (L obinson, I	ast name first, Mark	if indi	ividual)		<del> </del>					 · · · · · · · · · · · · · · · · · · ·
		lesidence Addi s Avenue, Sa	'			i, City, State, Zip Co	de)				 
Ch	eck Box(e	s) that Apply:		Promoter	Ø	Beneficial Owner		Executive Officer	0	Director	General and/or Managing Partner
_	II Name (L amios, Al	ast name first, ex	if ind	ividual)							
		tesidence Addr ain Street, W				t, City, State, Zip Co	ode)				
Ch	neck Box(e	s) that Apply:		Promoter	Ø	Beneficial Owner	0	Executive Officer		Director	General and/or Managing Partner
	II Name (L	ast name first,	if ind	ividual)							
		tesidence Addi fain Street, V				t, City, State, Zip Co 7	ode)	· · · · · · · · · · · · · · · · · · ·		<del> </del>	 
CI	ieck Box(e	s) that Apply:		Promoter		Beneficial Owner		Executive Officer	0	Director	General and/or Managing Partner
Fu	ill Name (L	ast name first,	if ind	ividual)			· · · · · · · · · · · · · · · · · · ·				 
Business or Residence Address (Number and Street, City, State, Zip Code)											
CI	neck Box(e	s) 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)											
CI	heck Box(e	s) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director	General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

	B. INFORMATION ABOUT OFFERING											
									Yes	No		
1. Has the	1. 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.									<b>E</b>		
9 100	, ab a!!				•••						\$ 0.0	٥
2. What is	2. What is the minimum investment that will be accepted from any individual?									Yes	No	
3. Does th	e offering	permit join	t ownershi	p of a sing	le unit?		*****					<b>E</b>
	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 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)											
NA	Last name	nrst, n ma	ividualj									
Business or	Residence	Address (N	lumber and	i Street, C	ity, State, Z	ip Code)			<del> </del>	· · · · · · · · · · · · · · · · · · ·		<del></del>
		<del> </del>										
Name of As	sociated Bi	roker or De	aicr									
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit l	Purchasers						
(Check	"All State:	s" or check	individual	States)		*************	.,.,,	**********	••••••		☐ Al	l States
AL	ĀK	ΑZ	[AR]	CA	CO	CT)	DE	[DC]	(FL)	G <u>A</u>	HI	[ID]
IL)	IN	IA.	KS]	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NÝ	NH	NJ	NM	NY)	NC	ND	ОH	<u>OK</u>	OR	PA
RI	(SC)	SD	TN	TX	UT	[VT]	(VA)	WA	WV.	WI	WY	PR
Full Name	Last name	first, if ind	ividual)	<del></del>	<del></del>							
Business o	r Residence	: Address (	Number an	d Street, C	City, State, a	Zip Code)						
		<del></del>										<del></del>
Name of As	sociated B	roker or De	aler									
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State	s" or check	individual	States)		************		***************************************			☐ Al	l States
AL	AK	AZ	AR	CA	col	टिंग	DE	[DC]	FL	[GA]	HI	ΙĐ
		IA	KS]	KY	LA)	ME	MD	MA	MI	MN	MS	MO
MT	NE	NŸ	NH	NJ	NM)	NY	NC)	ND	OH	OK.	OR	PA
RI	SC	SD	TN	IX	UT	VT]	VA	WA	WV	WI	WY	PR
Full Name	(Last name	first, if ind	ividual)		<del></del>			<del></del>	<del> </del>		<del></del>	
Business o	r Residence	Address (	Number an	d Street C	City State	Zin Code)						
		(			,,	p						
Name of A	sociated B	roker or De	aler									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)								1 States				
AL	AK	AZ	AR	CA	CO	CT)	DE	DC]	FL	GA	HI	(ID)
	ĪN	ΙΑ	KS	KY	ŪΑ	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	HK	ГИ	NM)	NY	NC	ND	OH	OK)	OR	PA
RE	(SC)	SD	(TN)	TX	UT	VT	VΑ	WÄ	₩₹	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

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 already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	0.00	00.0
	Equity	·	\$ 0.00
	Common  P Preferred		
	Convertible Securities (including warrants)	0.00	00.0
	Partnership Interests		§ 0.00
	Other (Specify)		
	Total		s 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.	•	<u> </u>
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 Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	\$ 0.00
	Non-accredited Investors	0	\$_0.00
	Total (for filings under Rule 504 only)	0	\$_0.00
	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 Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		s
	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	<b>Z</b>	\$ <sup>0.00</sup>
	Printing and Engraving Costs		. 100.00
	Legal Fees	_	40.000.00
	Accounting Fees		0.00
	Engineering Fees	_	0.00
	Sales Commissions (specify finders' fees separately)	4	· · · · · · · · · · · · · · · · · · ·
	Other Expenses (identify) Filing and related fees		- 1 200 00
	Total	ت	\$ .19,300.00

_	Ç. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
-	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		s_480,700.00
5.	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		384,000.00	<b>5</b> 34,200.00
	Purchase of real estate			
	Purchase, rental or leasing and installation of macland equipment	hinery	¬\$	<b></b>
	Construction or leasing of plant buildings and faci			
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asse issuer pursuant to a merger)	ue of securities involved in this ts or securities of another		
	Repayment of indebtedness		□\$	
	Working capital		<b>2</b> \$ 62,500.00	
	Other (specify):			s
			s	
	Column Totals		\$ 446,500.00	<b>∑</b> \$ 34,200.00
	Total Payments Listed (column totals added)			0,700.00
		D. FEDERAL SIGNATURE		
sis	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commis	ssion, upon writte	le 505, the following n request of its staff
Iss	nuer (Print or Type)	Signature,	Date	
	RANDAMERICA, INC.	Mark	July 8, 2008	
Ne	me of Signer (Print or Type)	Title of Signer Print or Type)		
Mic	chael J. Sadak	Chairman of the Board		

**END** 

- ATTENTION -

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