

T03000000867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

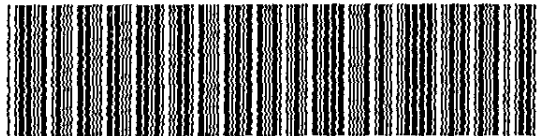
(Business Entity Name)

(Document Number)

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~~W03-10804~~

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T03-867

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL -9 AM 9:31



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 16, 2003

MICHAEL SCHUITEN
SCOOTER DEPOT, INC.
7601 E. TREASURE DRIVE, SUITE 2022
MIAMI, FL 33141

SUBJECT: BINETTO
Ref. Number: W03000010804

We have received your document for BINETTO and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Class(es) (12) would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) (12).

The specimens provided this office are not acceptable; we need three permanent specimens, which may be the same or different. We do not accept photocopies or camera ready copies. We do not accept specimens that have been altered or defaced in any manner. We will accept labels, decals or tags that are affixed to the actual goods or products. We will accept three LEGIBLE photographs of the goods or products with the specimens affixed. If this is some kind of publication, newspaper, magazine, or column, we need three of the actual publications. We need specimens for each class of registration. We DO NOT accept letterhead, stationery, envelopes, invoices or mailing labels.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux
Corporate Specialist Supervisor

Letter Number: 303A00022750

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

TC Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Name & address to whom acknowledgment should be sent:

SCOOTER DEPOT, INC
7601 E. TREASURE DRIVE STE #2022
MIAMI FL 33141
(305) 866-8556
Daytime Telephone number

PART I

1. (a) Applicant's name: SCOOTER DEPOT, Inc
- (b) Applicant's business address: 7601 EAST TREASURE DRIVE STE 2022
MIAMI FL 33141
City/State/Zip
- (c) Applicant's telephone number: (305) 866-8556
- Individual Corporation Joint Venture Other: _____
 General Partnership Limited Partnership Union

If other than an individual,

DOCUMENT #

- (1) Florida registration number: PO 3000010414 (2) Domicile State: FLORIDA
- (3) Federal Employer Identification Number: 57-114-6647

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:
(i.e., furniture moving services, diaper services, house painting services, etc.)

- (b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:
(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

SCOOTERS, SCOOTER ACCESSORIES, ELECTRIC SCOOTERS

- (c) The mode or manner in which the mark is used: (i.e., labels, decals, newspaper advertisements, brochures, etc.)

LABEL, MARKED ON SCOOTER, WATERPLATE
ON SCOOTER.

(Continued)

(d) The class(es) in which goods or services fall:

12

PART II

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: 01-01-03 (b) Date first used in Florida: 01-01-03

PART III

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

Binetto

English Translation

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "

" APART FROM THE MARK AS SHOWN.

I, Michael Schviten, being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct

MICHAEL SCHVITEN

Typed or printed name of applicant

Michael Schviten

Applicant's signature or authorized person's signature

(List name and title)

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DIVISION OF CLERK OF COURTS
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STATE OF Florida

COUNTY OF Miami-Dade

On this 7th day of April, 2003, Michael Mauricio Schviten personally appeared before me,

who is personally known to me whose identity I proved on the basis of FL Driver License
5350-553-94-009-0

(Seal)

Maria L. Haslam

Notary Public Signature

MARIA L. HASLAM

Notary's Printed Name

My Commission Expires: 01-18-04

FEE: \$87.50 per class

