

105000000024

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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✓✓

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

**TO: Division of Corporations**  
**Post Office Box 6327**  
**Tallahassee, FL 32314**

Name & address to whom acknowledgment should be sent:

VIVE LA FETE  
7175 SW 47 ST # 205  
MIAMI, FL 33155  
( 305 ) 740-4646  
Daytime Telephone number

**PART I**

1. (a) Applicant's name: VIVE LA FETE, Inc.

(b) Applicant's business address: 7175 SW 47 STREET #205  
MIAMI, FL 33155

(c) Applicant's telephone number: ( 305 ) 740-4646  
☐ Individual ☒ Corporation ☐ Joint Venture ☐ Other, \_\_\_\_\_  
☐ General Partnership ☐ Limited Partnership ☐ Union

If other than an individual,

(1) Florida registration number: M24625 (2) Domicile State: FLORIDA  
(3) Federal Employer Identification Number: 59-2810920

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.)

N/A

(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.)

GIRLS AND BOYS APPAREL, BABY AND CHILDREN APPAREL

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

LABEL, HANG TAGS, ADVERTISING, BROCHERS, LOGO, PACKING SUPPLIES,  
RIBBON, PURCHASE ORDERS, INVOICES AND STATIONARY.

(Continued)

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

CLASS 25

**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: JANUARY 1985 (b) Date first used in Florida: JAN 05 1985

**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.)

VIVE LA FETE

English Translation FOR PARTY WEAR

**2. DISCLAIMER (if applicable)**

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " VIVE LA FETE  
" APART FROM THE MARK AS SHOWN.

I, PATRICIA CADENA, 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

PATRICIA CADENA FOR VIVE LA FETE

Typed or printed name of applicant

PATRICIA CADENA/MANAGER

Applicant's signature or authorized person's signature  
(List name and title)

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

On this 13<sup>th</sup> day of Dec, 2004, PATRICIA CADENA  
appeared before me,

☒ who is personally known to me ☐ whose identity I proved on the basis of Driver

(Seal)



Zoraida Seijo  
Commission #DD205900  
Expires: May 11, 2007  
Bonded Thru  
Troy Pain Insurance

Notary Public Signature

Notary's Printed Name

My Commission Expires: 05/11/07

FEE: \$87.50 per class

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