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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

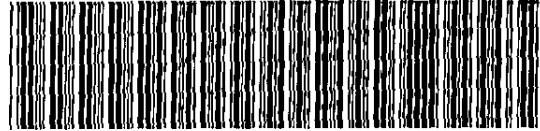
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Special Instructions to Filing Officer:

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FILED  
05 JUL -7 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MC  
~~405-29616~~  
105-872  
✓  
✓



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

June 16, 2005

AVA K. DOPPELT, ESQUIRE  
ALLEN, DYER, ET AL.  
P.O. BOX 3791  
ORLANDO, FL 32802-3791

SUBJECT: THE ABC GAME AND SLOGAN: "SCAN AND WIN!"  
Ref. Number: W05000029616

We have received your document for THE ABC GAME AND SLOGAN: "SCAN AND WIN!" and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following term(s) by completing the disclaimer statement found in #2 of Part III of the application: "GAME"

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  
Document Specialist Supervisor

Letter Number: 705A00041641

**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:

Ava K. Doppelt, Esquire

255 S. Orange Ave., Suite 1401

Orlando, FL 32801

( 407 ) 841-2330

Daytime Telephone number

**PART I**

1. (a) Applicant's name: ABC Liquors, Inc.

(b) Applicant's business address: 8989 South Orange Avenue, P. O. Box 593688

Orlando, FL 32859-3688

City/State/Zip

(c) Applicant's telephone number: ( 407 ) 851-0000

Individual

Corporation

Joint Venture

Other: \_\_\_\_\_

General Partnership

Limited Partnership

Union

If other than an individual,

(1) Florida registration number: 162281

(2) Domicile State: Florida

(3) Federal Employer Identification Number: 59-0686670

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.)

Retail liquor store and cocktail lounge services, promotional contests

(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.)

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

Print, TV and radio advertisements, signs, flyers, website, promotional items

(Continued)

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

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**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: 6/1/2001 (b) Date first used in Florida: 6/1/2001

**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.)

An oval containing the word THE above the letters ABC in blocks, above the word GAME. The words SCAN AND WIN!

English Translation

2. DISCLAIMER (if applicable)

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

I, \_\_\_\_\_, 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

Charles E. Bailes, III, President and CEO

Typed or printed name of applicant

*Charles E. Bailes III*

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

STATE OF Florida

COUNTY OF Orange

On this 25<sup>th</sup> day of May, 2005, Charles E. Bailes, III personally appeared before me,

who is personally known to me  whose identity I proved on the basis of \_\_\_\_\_

FILED  
05 JUL -7 PM 2:01  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

(Seal)



Robin L. Martin  
My Commission DD0342745  
Expires October 03, 2008

*Robin L. Martin*  
Notary Public Signature

Robin L. Martin  
Notary's Printed Name

My Commission Expires: 10-3-08

FEE: \$87.50 per class