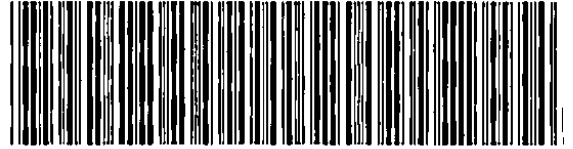


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19 SEP -3 PM 12:35
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K SAIY
SEP 25 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 19, 2019

L. GREGORY LOOMAR, ESQ
L. GREGORY LOOMAR, PA
5550 GLADES RD, STE. 500
BOCA RATON, FL 33431

SUBJECT: SHADOW CABARET & DESIGN OF "SHADOW" IN STYLIZED
FONT GRADIENT CHROME WITH AN ARROW ON THE BOTTOM OF THE "S".
AND "CABARET" IN SCRIPT
Ref. Number: W19000066284

We have received your document for SHADOW CABARET & DESIGN OF "SHADOW" IN STYLIZED FONT GRADIENT CHROME WITH AN ARROW ON THE BOTTOM OF THE "S". AND "CABARET" IN SCRIPT and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The description of the trademark or service mark, which is listed in Part III, cannot include such terms as and/or, with or without, sometimes includes, may be blue or white in color, etc. If your mark varies in color or individual components, then you must submit a separate application for each version of the mark. Please revise Part III of the enclosed application accordingly.

The specimens provided this office are not acceptable; we need three permanent specimens, **which may be the same or different**. We do not accept camera ready copies. We do not accept specimens which have been altered or defaced in any manner. In order to register your service mark, we need specimens from which we can determine the services being rendered. We will accept brochures, newspaper, or magazine advertisements, or business cards. If business cards are used, we must be able to determine from the business card the services offered. The mere mark, address, city, etc., on the business card, brochure, or advertisement is not acceptable -- we must be able to look at the specimens provided and be able to determine the services being rendered. We need specimens for each class of registration. We DO NOT accept letterhead, stationery, envelopes, invoices or mailing labels.

Please attach your specimens to a copy of this letter or to your corrected application, if it was returned to you for correction(s), and return it/them to this office for processing.

RECEIVED

SEP 03 2019

We need specimens that have not been altered or defaced.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if the applicant fails to reply or resubmit the corrected/amended application within three months from date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 719A00014729

RECEIVED

SEP 03 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHADOW CABARET
(Mark to be registered)

The enclosed Trademark/Service Mark Application, specimens and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

L. Gregory Loomar, Esq.
(Name of Person)

L. Gregory Loomar, PA
(Firm/Company)

5550 Glades Rd., Ste. 500
(Address)

Boca Raton, FL 33431
(City/State and Zip Code)

For further information concerning this matter, please call:

L. Gregory Loomar, Esq. at (561) 203-6507
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(NOTE: The information contained in this cover letter will be included in the permanent record and will be available to the general public.)

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

19 SEP -3 P1
TALLAHASSEE, FL

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

PART I

1. OWNER/APPLICANT: Enter the name and address of the individual or the business entity to be listed as the owner of the T and/or Service Mark on the records of the Florida Department of State.

(a) Owner's/Applicant's name: Almaz Enterprise, Inc.

(b) Owner's/Applicant's business address: 766 E. 25th Street
Hialeah, FL 33013

If different, Owner's/Applicant's mailing address: 816 SW 17th Street
Fort Lauderdale, FL 33315

(c) Owner's/Applicant's telephone number: 954 433-2345

Check the appropriate box to indicate the Owner/Applicant is a(n):

- Individual Corporation Joint Venture Limited Liability Company
- General Partnership Limited Partnership Union Other: _____

If the Owner/Applicant is a business entity, the business entity must have an active filing or registration on file with the Florida Department of State. If the Owner/Applicant is not an individual, enter the business entity's Florida registration/document number in #1, the country under the laws of which the business entity is currently formed, organized or incorporated under in #2, and the entity's employer identification number (EIN) in #3.

(1) Florida registration/document number: P17000078785

(2) Domicile State or Country: Florida

(3) Federal Employer Identification Number: 82-2965931

2. (a) SERVICE MARK: If the owner/applicant is using the name, logo, design and/or slogan being registered in connection with a service, the mark is a service mark. If the mark is a service mark, the applicant/owner must list the specific service(s) the mark is used in connection with. For example: furniture moving services, diaper services, house painting services, wholesale and retail sale of tractor equipment, etc. If the owner/applicant is using the mark to identify services available in the market place, enter the specific services being rendered here:

(Note: List only those services currently being rendered by the owner/applicant. Do not include future services.)

Class 41 - Entertainment, nightclub, gentleman's club

2. (b) TRADEMARK: If the owner/applicant is using the name, logo, design and/or slogan being registered in connection with product manufactured by the owner/applicant or on the owner/applicant's behalf, the mark is a trademark. If the mark is a trademark applicant/owner must list the specific product(s) the name, logo, design and/or slogan is being used to identify. For example sportswear, cat food, barbecue grills, shoe laces, etc. If the owner/applicant is using the name, logo, design and/or slogan to identify available in the market place, enter the specific product(s) the name, logo, design and/or slogan is being used to identify:

(Note: List only those product(s) currently available. Do not include future products.)

N/A

19 SEP - 3 PM 12:40

2. (c) HOW IS THE NAME, LOGO, DESIGN AND/OR SLOGAN CURRENTLY USED:

SERVICE MARKS: If the name, logo, design and/or slogan are/is being used in connection with a type of service, you must form(s)/mean(s) of advertisement the applicant/owner is using to advertise the services to the general public. For example advertisements, business cards, brochures, flyers, pamphlets, menus, etc. If the mark is being used in connection with a type of how the name, logo, design and/or slogan are/is being used in advertising here:

Class 41 - Entertainment, nightclub, gentleman's club; promotion of events, advertising, business cards, brochures, flyers, pamphlets, menus

TRADEMARKS: If the name, logo, design and/or slogan are/is being used to identify a product manufactured by or for the applicant you must specify how the mark is applied or affixed to the actual product or its packaging. For example: a tag, label, imprinted on the actual product, etc. If the mark is being used in connection with a specific product, state how the name, logo, design and/or slogan or affixed to the actual product(s) or the packaging:

N/A

2. (d) FEE(S) AND CLASS(ES): There are a total of 45 classes or categories in which all products or services must be categorized. The fee to register a mark is \$87.50 per class. Make check payable to Florida Department of State.

List the class(es) which apply to the product(s) and/or service(s) listed in 2(a) and/or 2(b) above:

Class 41

PART II

1. You must state the date the name, logo, design and/or slogan was first used in the state of Florida, and, if it was used in another country, the date you first used the name, logo, design and/or slogan in the other state or country. Enter the month, day, and year logo, design and/or slogan was first used by the applicant/owner, the predecessor, or a related company in Florida. If the name, logo and/or slogan has been used in another state or country, then you must also enter the month, day, and year the name, logo, design and/or slogan was/were used in another state or country, when applicable.

Note: The Florida Statutes require a mark to be in use prior to registration.

(a) Date first used in other state or country, if applicable: N/A

(b) Date first used in Florida: 9/29/2017

19 SEP -3 PM 12:40
TALLAHASSEE, FLORIDA

PART III

ENTER NAME, LOGO, DESIGN AND/OR SLOGAN BEING REGISTERED:

1. Enter the name, a brief description of the logo or design, and/or the slogan you are registering. The description of the logo and/or must be 25 words or less. List the exact name, slogan, and/or description of the logo/design here: (NOTE: The name, logo, design and/or slogan listed in this section must match the exact name, logo, design and/or slogan listed on your specimens or examples.)

The name/mark "Shadow Cabaret"; the two words used in conjunction,
the word "Shadow" with a stylized "S" with an arrow on the bottom of the S
used in conjunction with the word "Cabaret"

Provide the English translation of any and all terms listed #1 above, when applicable: _____

2. DISCLAIMER STATEMENT (if applicable):

Your mark may include a word or design that is commonly used by others. Commonly used terms or designs must be disclaimed. If you disclaim a specific term or design, you are acknowledging this term is commonly used by others and that you do not claim the exclusive right to use the disclaimed term or design. All geographical terms and representations of cities, states or countries must be disclaimed (e.g., Miami, Orlando, Florida, the design of the state of Florida, the design of the United States of America, etc.). Corporate suffixes and other terms readily associated with the specific product(s) and/or(s) service being provided must also be disclaimed.

Enter all terms listed in #1 above which require a disclaimer in the space provided below:

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM(S) Shadow or Cabaret

"APART FROM THE MARK AS SHOWN.

3. ATTACH OR INCLUDE THREE SPECIMENS OR EXAMPLES OF THE TRADEMARK OR SERVICE MARK REGISTERED

Chapter 495, F.S., requires you to submit three specimens (samples or examples) of the mark in use. You must submit three specimens for each class listed in Part I #2(d). The name, logo, design and/or slogan on the specimens must be identical to the name, design and/or slogan being registered. You may provide three identical specimens or three different specimens. For each service mark (classes 35-45), you may provide three newspaper advertisements, business cards, brochures, flyers, or any combination thereof. For trademark class (classes 1-34), you may provide three tags, labels, boxes, etc. or any combination thereof. Photographs of bulky specimens are acceptable if the mark being registered and the good(s) or product(s) are clearly legible.

SIGNATURE OF APPLICANT/OWNER AND NOTARIZATION:

SHEHRAZADE N. AHMAD

I, SHEHRAZADE N. AHMAD, 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 to the best of my knowledge no other person except a related company has registered this mark in this state or has the right to use such mark in Florida either in the identical form thereof or in such near resemblance as to be likely, when applied to the goods or services of such other person to cause confusion, cause mistake or to deceive. 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.

SHEHRAZADE N. AHMAD

Typed or printed name of applicant

Shehrazade

Applicant's signature (List name and title)

STATE OF Florida

COUNTY OF Broward

Sworn to and subscribed before me on this July, 2019 day of SHEHRAZADE N. AHMAD (Name of Individual Signing)

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

(Seal)

Notary Public Signature

Notary's Printed Name

My Commission Expires:

FILING FEE: \$87.50 per class

ABU TALES BHUYAN MY COMMISSION # 00 078388 EXPIRES: June 30, 2021 Bonded Thru Budget Notary Services

WEDNESDAY MAY 29 2019

A
TRAVEL
EVENTS

OverTime

W E D N E S D A Y S

THE MEETING YOU WILL NOT WANT TO MISS!

A NETWORKING EVENT FOR
BUSINESS PROFESSIONALS

OPEN BAR 6PM-8PM
W/ YOUR BUSINESS CARD AT THE DOOR

FREE ENTRY BEFORE 8PM

SHADOW
Cabaret

CALL 786 401 6081 FOR MORE INFORMATION
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