

OFFICE USE ONLY (Document #)

196000000839

(Requestor's Name)

(Address)

(City, State, Zip) (Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. Perk Place (30)
(Corporation Name) (Document #)
- 2. _____
(Corporation Name) (Document #)
- 3. _____
(Corporation Name) (Document #)
- 4. _____
(Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

196-839

Name	
Availability	<i>up up</i>
Document Examiner	NJC
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Updater Verifier	NJC
Acknowledgement	NJC
W. P. Verifier	NJC

Examiner's Initials

Florida Department of State, Jim Smith, Secretary of State

TRADE OR SERVICE MARK REGISTRATION

Application for Registration of a Trade Mark, Chapter 495, Florida Statutes.

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

Name and address to whom correspondence should be sent:
Thomas P. McNamara, Esq.
2909 Bay to Bay Blvd., Ste. 309
Tampa, FL 33629

Applicant's Phone Number
(813) 837 - 0727

PART I

1. (a) Applicant's name: The Pick Kwik Corporation
(b) Applicant's business address: 3310 W. Main Street
Tampa, FL 33607

() individual (xx) corporation of the State of Florida 487523
() general partnership () limited partnership of the State of _____

2. (a)(1) If the mark to be registered is a service mark, the services in connection with which the mark is used.

- (2) If the mark to be registered is a trademark, the goods in connection with which the mark is used.

Coffee

- (b) The mode or manner in which the mark is used:

The mark is to be displayed on cups in which coffee
is served.

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

Class 30, staple foods

PART II

1. Date first used by the Applicant, predecessor, or a related company.

(a) Date first used anywhere: June 1996

(must include month and year)

June 1996

(b) Date first used in Florida: _____

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.)

The words "Perk Place" with a design of a contemporary stick figure depicting service of coffee to customers.

DISCLAIMER (if applicable)

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

I John R. Jaeb being sworn, depose and say that I am the applicant herein, and the owner of the mark 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 behalf of The Pick Kwik Corporation, and I have read the application and know the contents thereof and that the facts stated herein are true and correct.

The Pick Kwik Corporation

Name of individual or Name of Business in which mark is filed, if any

[Signature], President Applicant or authorized officer signature (give title)

Subscribed and sworn to before me this 28th day of JUNE, 1996.

(Notary Seal)



OFFICIAL SEAL CHERYL A. LYONS My Commission Expires Dec. 9, 1996 Comm. No. CC 245409

[Signature] Signature of Notary Public

CHERYL A. LYONS, Notary Comm # : CC 245409 Exp 12/9/96

My Commission Expires:

FEE: \$87.50 per class

