

06-27-2000



101390216

RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY

6-9-00

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)  
Document ID #
- Correction of PTO Error  
Reel #  Frame #
- Corrective Document  
Reel #  Frame #

Conveyance Type

- Assignment  License
- Security Agreement  Nunc Pro Tunc Assignment  
Effective Date  
Month Day Year
- Merger
- Change of Name
- Other

Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name

Formerly

- Individual  General Partnership  Limited Partnership  Corporation  Association
- Other
- Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

- Individual  General Partnership  Limited Partnership  If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)
- Corporation  Association
- Other
- Citizenship/State of Incorporation/Organization

06/25/2000 AN/COT1 0006012 7/28/00

FOR OFFICE USE ONLY

01 FC:461  
01 FC:462

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK

REEL: 002093 FRAME: 0800

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages**

Enter the total number of pages of the attached conveyance document including any attachments.

#

**Trademark Application Number(s) or Registration Number(s)**

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

**Trademark Application Number(s)**

**Registration Number(s)**

<input type="text" value="75-823657"/>	<input type="text" value="75-630266"/>	<input type="text" value="75-479601"/>
<input type="text" value="75-768999"/>	<input type="text" value="75-758110"/>	<input type="text" value="75-593328"/>
<input type="text" value="75-574618"/>	<input type="text" value="75-479150"/>	<input type="text" value="75-517997"/>

<input type="text" value="1532958"/>	<input type="text" value="2320367"/>	<input type="text" value="1826885"/>
<input type="text" value="1516533"/>	<input type="text" value="1359958"/>	<input type="text" value="2268405"/>
<input type="text" value="2237105"/>	<input type="text" value="1904534"/>	<input type="text" value="1765331"/>

**Number of Properties**

Enter the total number of properties involved.

#

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed

Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes

No

**Statement and Signature**

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Stephen Prostor

6/7/00

Name of Person Signing

Signature

Date Signed

**RECORDATION FORM COVER SHEET  
CONTINUATION  
TRADEMARKS ONLY**

FORM PTO-1618C  
Expires 06/30/99  
OMB 0651-0027

U.S. Department of Commerce  
Patent and Trademark Office  
**TRADEMARK**

**Conveying Party**

Enter Additional Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name



Formerly

Individual     General Partnership     Limited Partnership     Corporation     Association

Other

Citizenship State of Incorporation/Organization

**Receiving Party**

Enter Additional Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)




City

State/Country

Zip Code

Individual     General Partnership     Limited Partnership

Corporation     Association

Other

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**Trademark Application Number(s) or Registration Number(s)**

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Mark if additional numbers attached

**Trademark Application Number(s)**

**Registration Number(s)**

75-530662	75-449744	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>

1749494	1515372	1090591
1302795	1383513	1526721
1814578	1784817	1341079
1212871	1991902	1855191
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Exhibit A**

**REGISTERED TRADEMARKS**

<b>TRADEMARK</b>	<b>REGISTRATION NUMBER</b>	<b>REGISTRATION DATE</b>
MAGIC IN THE NIGHT (and Design)	1,532,958	4/4/89
MAGIC IN THE NIGHT	2,320,367	2/22/00
SNAPLIGHT	1,826,885	3/15/94
LIGHTSHAPE	1,516,533	12/13/88
LITE-ROPE	1,359,958	9/17/85
SAFETYSTICK	2,268,405	8/10/99
BOVINE BEACON	2,237,105	4/6/99
GLOW STICK (Principal Register)	1,904,534	7/11/95
FLEX-STICK	1,765,331	4/13/93
FLEX-STICK (and Design)	1,749,494	1/26/93
LIGHT LINES (and Design)	1,515,372	12/6/88
LITE-UP	1,090,591	5/9/78
LITE-UP	1,302,795	10/3/84
LITE-UP	1,383,513	2/18/86
Design Only (Container Shape)	1,526,721	2/28/89
Design Only (Light Stick Shape), Supp. Reg.	1,814,578	12/28/93
IMPACT	1,784,817	7/27/93
LUNKER LIGHTS	1,341,079	6/11/85
PML	1,212,871	10/19/82
S.E.E.	1,991,902	8/6/96
GLO-FLEX	1,855,191	9/20/94

TRADEMARK APPLICATIONS


<b>APPLICATION</b>	<b>APPLICATION NUMBER</b>	<b>APPLICATION DATE</b>
SAFETY-GLOW	75-823657	10/15/99
CETRA-SAFE	75-630266	1/29/99
PARTY ANIMALS	75-479601	5/5/98
HEAT SEEKER	75-768999	8/5/98
CHEMILUX	75-758110	7/22/99
THERE'S NO BUSINESS LIKE GLOW BUSINESS	75-593328	11/23/98
SANTA SIGNAL	75-574618	10/19/98
GLOW 2000	75-479150	5/5/98
STARLIGHT	75-517997	7/13/98
THE GREAT OUTDOORS	75-530662	8/4/98
DESIGN ONLY	75-449744	3/13/98

**NOTICE OF SECURITY INTEREST**

Notice is hereby given that OMNIGLOW CORPORATION, a Delaware corporation with an address at 96 Windsor Street, West Springfield, Massachusetts 01089 ("Debtor") has granted a security interest to HSBC Bank USA, with its principal place of business located at 140 Broadway, New York, New York 10005-1180, as agent ("Agent"), in and to all of Debtor's trademarks, including, without limitation, the trademarks listed on Exhibit A and the applications and registrations associated therewith, pursuant to an agreement between Debtor and Agent dated of even date herewith and as the same may be amended or supplemented from time to time.

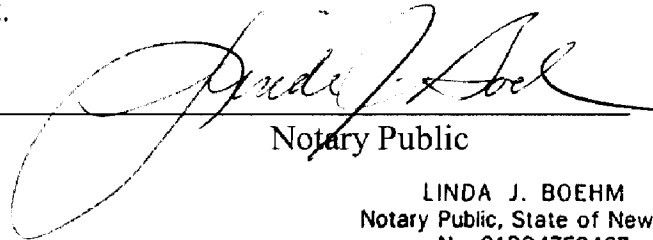
Dated: as of June 7, 2000

OMNIGLOW CORPORATION

By   
Name: R.W. LABATTE  
Title: Treasurer

STATE OF NEW YORK )  
 )SS.:  
COUNTY OF NEW YORK )

On the 7<sup>th</sup> day of June, 2000 before me, the undersigned, a notary public in and for said state, personally appeared R.W. LaBatte, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that (s)he executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

  
Notary Public

LINDA J. BOEHM  
Notary Public, State of New York  
No. 01804750467  
Qualified in Westchester County  
My Commission Expires Oct. 31, 2001