

10-17-2006

Form PTO-1594 (Rev. 07/05)
OMTS Collection 0661-0027 (exp. 8/30/7)

U.S. DEPARTMENT OF COMMERCE
United States Patent and Trademark Office



T

103322148

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies):

William S. Bowen

- Individual(s) Association
- General Partnership Limited Partnership
- Corporation- State: _____
- Other _____

Citizenship (see guidelines) _____

Additional names of conveying parties attached? Yes No

3. Nature of conveyance / Execution Date(s) :

Execution Date(s) Nov. 19, 2003

- Assignment Merger
- Security Agreement Change of Name
- Other _____

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: William S. Bowen

Internal Address: _____

Address: _____

Street Address: 4910 Westwood DR.

City: Huntsville

State: AL

Country: _____ Zip: 35810

- Association Citizenship _____
- General Partnership Citizenship _____
- Limited Partnership Citizenship _____
- Corporation Citizenship _____
- Other _____ Citizenship _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

2363505

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

5. Name & address of party to whom correspondence concerning document should be mailed:

Name: William S. Bowen

Internal Address: _____

Street Address: 4910 Westwood DR.

City: Huntsville

State: AL Zip: 35810

Phone Number: _____

Fax Number: _____

Email Address: _____

6. Total number of applications or registrations involved: _____

- Authorized to be _____
- Authorized to be _____
- Enclosed

8. Payment Information:

- a. Credit Card Last 4: _____ Exp: _____
- b. Deposit Account Number: _____
- Authorized User Name: _____

PREVIOUSLY PAID
fwd

9. Signature:

William S. Bowen

Signature

Nov. 19, 2003
Date

WILLIAM S. BOWEN

Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 5

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

Form PTO-1594 (Rev. 07/05)
OMB Collection 0651-0027 (exp. 8/30/2008)

U.S. DEPARTMENT OF COMMERCE
United States Patent and Trademark Office

Continuation

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies):

- Individual(s)
- General Partnership
- Corporation- State: _____
- Other _____
- Association
- Limited Partnership

Citizenship (see guidelines) _____

Additional names of conveying parties attached? Yes No

3. Nature of conveyance / Execution Date(s) :

Execution Date(s) _____

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: SAL CUOMO
 Internal Address: _____
 Street Address: 2405 Southern Blvd
 City: BRONX
 State: NY
 Country: _____ Zip: 10458

- Association Citizenship _____
- General Partnership Citizenship _____
- Limited Partnership Citizenship _____
- Corporation Citizenship _____
- Other _____ Citizenship _____

If assignee is not domiciled in the United States, a domestic representative designation is Attached: Yes No
(Designations must be a separate document from assignment)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No. (s) _____

B. Trademark Registration No. (s) _____

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

5. Name & address of party to whom correspondence concerning document should be mailed:

Name: _____
 Internal Address: _____
 Street Address: _____
 City: _____
 State: _____ Zip: _____
 Phone Number: _____
 Fax Number: _____
 Email Address: _____

6. Total number of applications and registrations involved:

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ _____

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

8. Payment Information:

a. Credit Card Last 4 Numbers _____
 Expiration Date _____
 b. Deposit Account Number _____
 Authorized User Name _____

9. Signature:

William S. Bowen Nov. 19, 2007
 Signature Date
WILLIAM S. BOWEN
 Name of Person Signing

Total number of pages including cover sheet, attachments, and document: _____

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

Form PTO-1594 (Rev. 07/05) OMB Collection 0651-0027 (exp. 6/30/2009) U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Office

Continuation

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies):
Individual(s) Association
General Partnership Limited Partnership
Corporation- State:
Other
Citizenship (see guidelines)
Additional names of conveying parties attached? Yes No

2. Name and address of receiving party(ies)
Additional names, addresses, or citizenship attached? Yes No
Name: Guy Villari
Internal Address:
Street Address: 386 AIRPORT RD
City: LIBERTY
State: NY
Country: Zip: 12754
Association Citizenship
General Partnership Citizenship
Limited Partnership Citizenship
Corporation Citizenship
Other Citizenship
If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No

3. Nature of conveyance / Execution Date(s) :
Execution Date(s)
Assignment Merger
Security Agreement Change of Name
Other

4. Application number(s) or registration number(s) and identification or description of the Trademark.
A. Trademark Application No.(s)
B. Trademark Registration No.(s)
Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Data if Application or Registration Number is unknown):

5. Name & address of party to whom correspondence concerning document should be mailed:
Name:
Internal Address:
Street Address:
City:
State: Zip:
Phone Number:
Fax Number:
Email Address:

6. Total number of applications and registrations involved:
7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$
Authorized to be charged by credit card
Authorized to be charged to deposit account
Enclosed
8. Payment Information:
a. Credit Card Last 4 Numbers Expiration Date
b. Deposit Account Number
Authorized User Name

9. Signature: William B Bowen
Signature Date: Nov. 16, 2003
Name of Person Signing
Total number of pages including cover sheet, attachments, and document:

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1480, Alexandria, VA 22313-1480

ALLIED PHOTOCOPY
ALLIED PHOTOCOPY

10/17/2006 13:20 2555334505

Form PTO-1594 (Rev. 07/05)
OMB Collection 0661-0027 (exp. 6/30/2008)

U.S. DEPARTMENT OF COMMERCE
United States Patent and Trademark Office

Continuation

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office; Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies):

- Individual(s)
- General Partnership
- Corporation- State: _____
- Other _____
- Association
- Limited Partnership

Citizenship (see guidelines) _____

Additional names of conveying parties attached? Yes No

3. Nature of conveyance /Execution Date(s) :

Execution Date(s) _____

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: DON MARTIN
 Internal Address: LION PRESS Suite 108
 Street Address: 3195 N. POWERLINE RD
 City: PAMPANO BEACH
 State: FL
 Country: _____ Zip: 33069

- Association
- General Partnership
- Limited Partnership
- Corporation
- Other _____
- Citizenship _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No. (s) _____

B. Trademark Registration No. (s) _____

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

5. Name & address of party to whom correspondence concerning document should be mailed:

Name: _____
 Internal Address: _____
 Street Address: _____
 City: _____
 State: _____ Zip: _____
 Phone Number: _____
 Fax Number: _____
 Email Address: _____

6. Total number of applications and registrations involved:

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ _____

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

8. Payment Information:

a. Credit Card Last 4 Numbers _____
 Expiration Date _____
 b. Deposit Account Number _____
 Authorized User Name _____

9. Signature:

William S. Bower
Signature

Nov-19, 2007
Date

WILLIAM S. BOWER
Name of Person Signing

Total number of pages including cover sheet, attachments, and document:

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

U.S. PATENT AND TRADEMARK OFFICE
OFFICE OF PUBLIC RECORDS

ASSIGNMENT DIVISION

ASSIGNMENT OF TRADEMARK

Whereas William S. Bowen
(Name of Assignor)

of _____
(Address)

has adopted, used and is using a (trademark) which is

(registered/ pending application) No. 2363505

dated _____; and

Whereas,

William S. Bowen, Sal Cuomo, Guy Villari, Don Martin
(Name of Assignee)

of _____
(Address)

is desirous of acquiring said (registered or pending) trademark;

Now therefore, for good and valuable consideration, the receipt

of which is hereby acknowledged, said William S. Bowen
(Assignor)

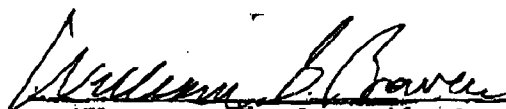
does hereby assign to the said William S. Bowen, Sal Cuomo, Guy Villari, Don Martin
(Assignee)

title, and interest in and the (trademark) goodwill of the

business symbolized thereby.

Date of Execution

Nov. 19, 2003


(Signature of assignor, if assignor is a corporation, give official title along with signature)