

DATE OF REGISTRATION/PUBLICATION

REGISTRATION NUMBER

DVH 0500

			2	13	2012		
			Month	Day	Yarar		
	DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SP.	ACE, USE A SEPA	ARATE CONTINUATION	SHEET. (For	n D-VH/CON)		
	Please give the make and model of the vessel that embo BREEZER-19wa	dies the design.					
TITLE	What is the type or style of the design for which registre MOTORBOAT	mon is sought.					
DESIGN Check here if this is a single dosign.	Provide a brief general statement setting forth the salient features of the design. OVERALL APPEARANCE INCLUDING HULL CONFIGURATION AND SHAPE						
Check here if registering more than one design. Use Form D-VI-I/CON for additional	If this design is derived from an earlier design, describe N/A						
designs.	Provide the name and address of the designer(s). The name design was made within the regular scope of employment of or impossible to ascribe. 1 Please check here if those conditions are satisfied and	ne of the employ- the designer(s) an	er may be given instea d (2) the individual auth	id of the designorship of the c	$\operatorname{rner}(s)$ if (1) the		
	Name: AIVARS KOZULS	Name:		. 7			
	SOMERVILLE, MA 02145						
umanakan M Kaja	If the owner is different from the designer(s) or employer is Name:	named above, pro	wide the name and add	ress of the ow	egges ara aanse ner		
OWNER, IF NOT DESIGNER(S)	Address: D/B/A INNOVATIVE BOAT GRO 103 THURSTON STREET SOMERVILLE, MA 02145		was a manager and a single	ornogramica piloto esta	-contractions are consume		
PRIORITY CLAIM	Was an application for registration of this design identified in an application filed in a foreign country that extends to designs of owners who are citizens of the United States, or to persons tiling applications in the United States, similar protection to that afforded in 17 USC chapter 13? Yes XNo Types XNo						
DATE MADE	Was this design made public before the date of application If yes, on what date? Mortin Say	? ☐ Yes Xi No	HA APPLICATION RECEIVED TO THE MENT OF T	VED 112 2012			

EXAMINED BY THE FORM D-VH

CHECKED BY CIM

CORRESPONDENCE

D Yes

FOR

COPYRIGHT

OFFICE

USE

ONLY

eseseji	Please provide the name and address of the person to whom correspondence regarding this application may be directed:						
100 100 100	Name: BORIS MILMAN, ESQ.						
CONTACT PERSON	Address: P.	P.O. BOX 352					
	B	ROOKLINE, MA 0244	6 Email address milmanla	Email address milmanlaw@lawyer.com			
	FAX number	617-734-5444	Daytime phone: (617	734-7100			
STATES	Give the name	and account number if the regist	tration fee is to be charged to a deposit account estab	lished in the Copyright Office:			
	Name of Acco						
DEPOSIT	Account num	ber: N/A					
CERTIFICATION AND SWORN STATEMENTS	DECLARATION: The undersigned, as the applicant or the applicant's duly appointed agent or representative, being hereby warned that willful false statements are punishable by fine or imprisonment, or both, under 18 USC §1001, and that such willful false statements may jeopardize the validity of this application or any resulting registration, hereby declares to the best of his or her knowledge and belief: (1) that the design has been fixed in a useful article: (2) that the design is original and was created by the designer(s), or employer if applicable, named in the application: (3) that those aspects of the design for which registration is sought are not protected by a design patent; (4) that the design has not previously been registered on behalf of the applicant or applicant's predecessor in title; and (5) that the applicant is the person entitled to protection and to registration under chapter 13 of title 17, United States Code. Complete if applicable: The design has been made public with a design notice as prescribed by 17 USC §1306. Following is the exact form of the design notice: Where on the useful article is the design notice located?						
	If the undersigned is not the applicant, he or she is properly authorized to execute this application on behalf of the applicant,						
1	>		AUGUST 25				
7	AIVARS I	KOZULS	DESIGNER Position or atta	OWNER			
		586 N/A	bester-line@	inhay ly			
	617-719-35 Enlightone number	Fax number	Email address	IIIDUX.IV			
Copyright write the (617-719-35 Falaphone number Office fees a	Fax number	rrent fees, check the Copyright Office websit	e at www.copyright.gov,			
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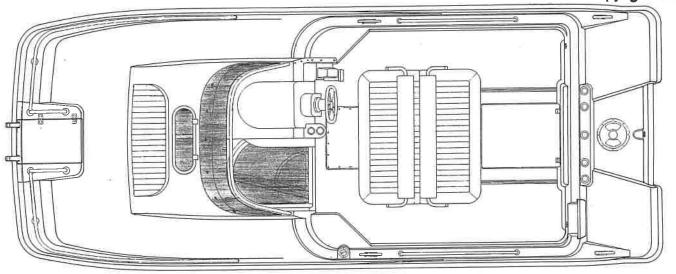


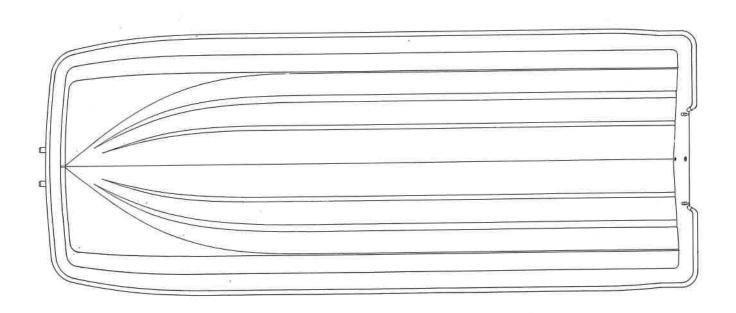


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