REGISTRATION NUMBER

DVH 0315

		DATE OF REGISTRATION/PUBLICATION				
		·Month 06 Day 26 Year 06				
	DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARA	TE CONTINUATION SHEET. (Form D-VH/CON)				
	Please give the make and model of the vessel that embodies the design. Caliari C42					
TITLE						
9 (a)	What is the type or style of the design for which registration is sought? Deep-V hull					
DESIGN(b)	Provide a brief general statement setting forth the salient features of the design. Overall appearance including hull with three vertically					
Check here if this is a single design.	including round cabin entrance door					
Check here if registering more than one design. Use Form D-VH/CON for additional						
DESIGNER(S)	Provide the name and address of the designer(s). The name of the employer design was made within the regular scope of employment of the designer(s) and or impossible to ascribe. □ Please check here if those conditions are satisfied and you are providing to the name: □ Paolo Caliari Name: □ Address: □ Le Continental □ Place Des Moulins □ 98000 Monaco (MC)	(2) the individual authorship of the design is difficul				
OWNER, IF NOT DESIGNER(S)	If the owner is different from the designer(s) or employer named above, provided above. Name: Caliari Super Yacht, Inc. Le Continental Address: Place Des Moulins 98000 Monaco (MC)	ide the name and address of the owner:				
5 (a) PRIORITY CLAIM	in an application filed in a foreign country that extends to (U) Country: _designs of owners who are citizens of the United States, or	oplication:				
6 DATE MADE PUBLIC	Was this design made public before the date of application? Yes No If yes, on what date? January 24, 2004 Month Day Year	ARPLICATION RECEIVED NOV 1 2 2004 FUNDS RECEIVED ARPLICATION RECEIVED NOV 1 2 2004 FUNDS RECEIVED F 140.00				

9	7
RTIFICATION AND	ORN STATEMENTS

EXAMINED BY 77 1/2	FORM D-VH
CHECKED BY	
CORRESPONDENCE	FOR COPYRIGHT
Yes	OFFICE
	USE
'	ONLY

		Yes	OFFICE	
			USE ONLY	
DO NOT W	/RITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SE			
7	Please provide the name and address of the person to whom	correspondence regarding this application ma	y be directed:	
1	Name: Mark D. Bowen, Esq., Stearn	ns Weaver, et al.		
ONTACT	Address: 200 E. Broward Blvd., Suit	te 1900		
ERSON	Ft. Lauderdale, FL 33301	Email addressMbowen@swmw	vas.com	
	FAX number (954) 462-9567	Daytime phone: (954) 462-	-9500	
7	Give the name and account number if the registration fee is to	be charged to a Deposit Account established in the	he Copyright Office:	
3	Name of Account:			
EPOSIT CCOUNT	Account number:			
SWORN STATEMENTS	that willful false statements are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001, and that such willful fals statements may jeopardize the validity of this application or any resulting registration, hereby declares to the best of his or her knowledg 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 U.S.C. §1306. Following is the exact form of the design notice: Protected vessel design Caliari Super Yacht, Inc. Where on the useful article is the design notice located? On the hull			
	If the undersigned is not the applicant, he or she is properly au	1	the applicant.	
	X Signature	11/5/oct		
	Mark D. Bowen Print or type name	Attorney for a	applicant	
	(954) 462-9500 Telephone number FAX number	Mbowen@swmwas.	.com	
	Office fees are subject to change. For current fees, ch	eck the Copyright Office website at www	copyright.gov,	
write the (Copyright Office, or call (202) 707-3000.			

Certificate will be mailed in window envelope to this address:

Name ▼ Mark D. Bowen, Esq. Number/Street/Apt ▼ 200 E. Broward Blvd., Suite 1900 City/State/ZIP ▼ Ft. Lauderdale, FL 33301

Complete all necessary spaces Sign your application in space 9 SEND ALL 3 ELEMENTS
IN THE SAME PACKAGE:

1. Application form

2. Nonrefundable filling fee in check or money order payable to Register of Copyrights

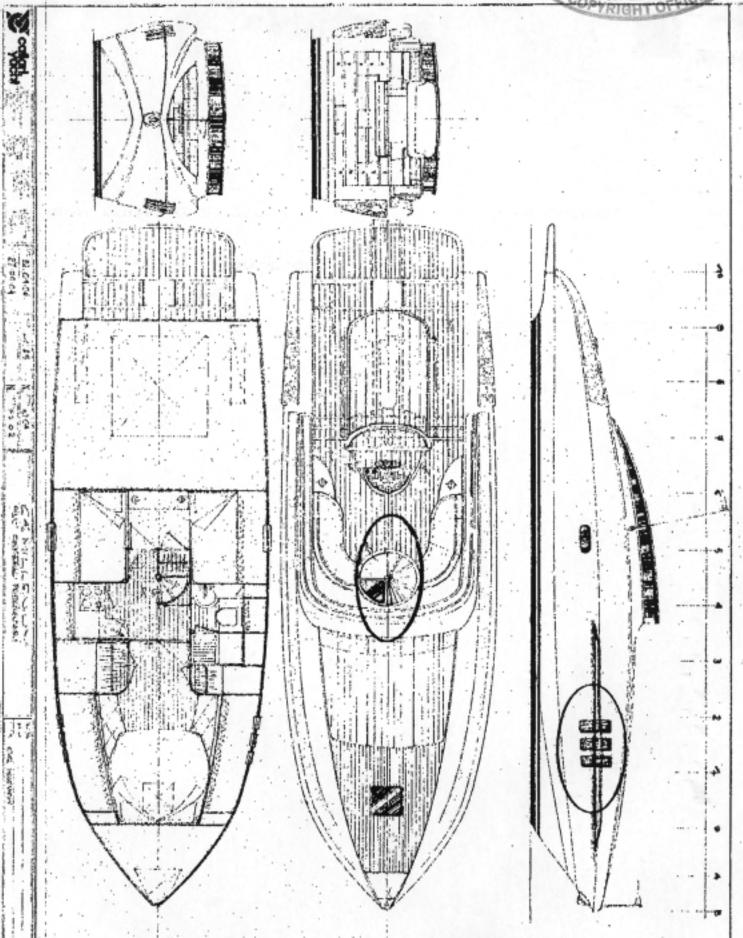
3. Design material

MAIL TO: Dept. D-VH Vessel Hull Registration P.O. Box 71380

Washington, D.C. 20024-1380

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