EXHIBIT B

Muhammad Ali Enterprises, LLC PROSPECTIVE LICENSEE Application Information Form!

| BASIC COMPANY INFORMATION | | | | | |
|--|---|--------------|--|---|--|
| Company Name: | | | | | |
| Company Address | | | | | |
| · . | City) | (State) | | (Zip) | |
| Contact Person: | | Title: | | | *************************************** |
| Telephone: (_ | | | | | |
| Facsimile: (| | - Web | Site Address: | | |
| Artwork & Appro | vals Contact (name/phone/e-mail): | YY CO | one rudiess. | | |
| Royalty & Report | ing Contact (name/phone/e-mail): | | | | |
| Marketing Contac | t: (name/phone/e-man): | | | · | |
| | PROD | UCT INFO | DRMATION | | |
| Description/list of | product(s) for which you seek a licen | se: | | | |
| • | | | | | |
| | ny currently manufacture or sell an ite | m similar to | the one you are seel | king to license? | |
| Yes No | | | | | |
| Estimated wholes | ale selling price/unit: | | | | |
| When will a proto | rice/unit: type or sample of the product to be so | ld be availa | ble for review? | | |
| | ime: | | | | |
| Proposed release | date: | | | | and the second s |
| | OWNERSHIP/M | IANAGEM | IENT INFORMATI | ON · | |
| Principal Owners (Complete Name, Title and Business Address) | | | | | |
| Timelpai Owners | (Comprete Hame, Hine and 2 sames | • | | | |
| | | 2 | | *************************************** | |
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| 3 | | 4 | | | |
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| - | | | | | |
| · | | _ | | | |
| Principal Manage | | | | | |
| 1.Preside | nt/CEO: | | ······································ | | |
| 2. Vice Pr | esident(s): | | | | *************************************** |
| 3.5ales D | Pirector: | | | | |
| | | | | | |

| S Distribution capability: (Please √) | | BUTION INFORMATION Domestic (US) Regional | | | |
|---|--|---|--|--|--|
| Would you plan to distribute this p | product: | | | | |
| | | o, number of states/region: | | | |
| | | ify: | | | |
| Sales Force: | in voilivoilos, il bo, opol | | | | |
| | s Force if so number of | cales staff | | | |
| | Own Sales Force, if so, number of sales staff: Reps, Jobbers, etc., if so, number of: | | | | |
| | | V1. | | | |
| | Agents, if so, number of agents: Total number of sales force: | | | | |
| 4. Total nun | iber of sales force: | | | | |
| Please describe your existing dis | tribution channels: | | | | |
| Type of Account | % of Sales Volume | Main Accounts Sold To (please list) | | | |
| Mass Merchants | | | | | |
| Discounters | | | | | |
| Department Stores | | | | | |
| Drug Chains | | | | | |
| Catalog Showrooms | | | | | |
| Toy Stores | | | | | |
| Mail Order Catalog | | | | | |
| Direct Mail | | | | | |
| Collectors Market | | | | | |
| Grocery Chains | | | | | |
| Warehouse Clubs | | | | | |
| Hardware Stores | | | | | |
| Specialty Stores | | | | | |
| Military Exchanges | | | | | |
| Sporting Goods Stores | | | | | |
| Internet | | | | | |
| Other (please specify) | Diamana ang ilang panggapanggan ang ang ang ang ang ang ang ang a | professional responsion for the first first to the first section of the | | | |
| Estimate of Annual Wholesale Sa | ales Volume of the items | you wish to manufacture under this license: | | | |
| (Please specify currency) | | | | | |
| Year 1: | Year 2: _ | | | | |
| Accounts to whom you plan to sell the licensed products: | | | | | |
| 1. | • | | | | |
| 2. | - | | | | |
| 3. | ······································ | | | | |
| 4, | | | | | |
| 5. | | | | | |
| | , | | | | |
| 7. | | | | | |
| If you currently manufacture a similar item, what was its wholesale dollar volume for most recent year? | | | | | |
| | | | | | |
| Company sale volume for most recent year: | | | | | |
| Company sale volume for previous year: | | | | | |
| | | | | | |



REFERENCES

Please list four retail and licensing references we can contact for an opinion on your product line and performance:

| Company Name | Contact Person/Title | Telephone & E-mail | | | | |
|--|--|--|--|--|--|--|
| | | | | | | |
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| | | and the second s | | | | |
| Control of the Contro | MARKETING INFORMATION | ON . | | | | |
| | | | | | | |
| Do you plan to conduct any advertising of | or promotion to support the produ | uct? Yes No | | | | |
| If you what town 2 (Places 4) | Consumer Advertising | | | | | |
| If yes, what type? (Please √) | | | | | | |
| Trade Advertising In-Store Materials | | | | | | |
| | www.archarbensenharbenberkeit/M | | | | | |
| | Sales/Trade Incentives Press Release | hamming 1000000000000000000000000000000000000 | | | | |
| | Co-Op Advertising | | | | | |
| | Other: (Specify) | | | | | |
| | | | | | | |
| Does your company use an advertising | g agency? Yes No | (Please √) | | | | |
| Agency's Name: | | | | | | |
| Agency's Address: | | | | | | |
| | | | | | | |
| | | | | | | |
| Key Contact: Telephone Number: () | E-mail | | | | | |
| | | | | | | |
| | | you plan to spend in support of this new | | | | |
| licensed product for the first year, should | you receive the license? \$ | | | | | |
| The state of the s | and autocoule asmobility? Vag | No (Dlanca 1/) | | | | |
| Does your company have product design and artwork capability? Yes No (Please √) | | | | | | |
| If yes, is design done in houseo | r byran autoida agancy ? | (Please 1/) | | | | |
| if yes, is design done in nouseo | by an outside agency: | (I lease V) | | | | |
| Does your company have a formal Qual | ty Control Program? Yes | No (Please √) | | | | |
| Does your company have a formar Quar. | ay Common 1 to | | | | | |
| | | | | | | |
| E CONTRACTOR DE L'ANNOUNT LE CONTRACTOR DE L'ANNOUNT LE CONTRACTOR DE L'ANNOUNT L'ANNO | LICENSING INFORMA | ATION | | | | |
| · · | | | | | | |
| Does your company currently manufacture any other products under licensing contracts? | | | | | | |
| Yes No (Please √) | | | | | | |
| If yes, please specify which licenses you | r company currently holds: | | | | | |
| | | and the second s | | | | |
| Licensing Company Property | | Years Under License | | | | |
| The control of the control of the state of the control of the cont | Control of the contro | | | | | |
| And the second s | Section (see a second per parameters and minimum and section (see a section of section section). | | | | | |
| | State of the second sec | and the second | | | | |

| takponger i terminan i nam | FINANCIAL INFORMATION | | | |
|--|---|--|--|--|
| Bank Reference: | Name: | | | |
| | Branch: | | | |
| | Address: | | | |
| • | (Street) | | | |
| | (City) (State) (Zip) | | | |
| | Telephone: ()Fax: () | | | |
| | | | | |
| Credit Reference: | Company Name: | | | |
| | Contact Person: | | | |
| | Address:(Street) | | | |
| | | | | |
| • | (City) (State) (Zip) | | | |
| e. Kajangandagangandaganghangkangkangangan melalagangan adalam a munda. Pyric Ajangki sagabah 24.445, | Telephone: () Fax: () | | | |
| | MANUFACTURING INFORMATION | | | |
| Will your company a | ctually manufacture this product? Yes No | | | |
| win your company a | octately individuo this product. Too | | | |
| If no, who will manu | facture this product? | | | |
| Unite Fore Both Number of factories i Location of p 1. 2. | ct be manufactured? (Please V) ed States/Domestic ign/International involved in manufacture of product: principal plants: | | | |
| | | | | |
| annigative est est en en est | IMPORTANT | | | |
| information submit 1. 2 2. 1 2. 5 3. 1 4. 1 | h this form any or all of the following information you can provide. The more ted, the faster MAE can make a decision on your application: Annual Report, D&B, or other Financials. Non-returnable product samples. Sales Catalog. Letters of commendation from retailers for product quality/service. Newspaper/magazine articles about your company. ed By: | | | |
| | | | | |
| | Date: | | | |

