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TALLANASSE, FLORID

N. CAUSSEAUX

FEB 2 6 2010

EXAMINER

Margel Needs 2nd Check!

TO:

Registration Section Division of Corporations

SUBJECT: ___

COVER LETTER

) (...am to be registered)

The enclosed Trademark/Service Mark Application, specimens and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)

Shino Bay Cosmetic Dermatology & Laser Institute 350 E. Las Olas Bivd. Ste 110 Fort Lauderdale, FL 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

(Area Code & Daytime Telephone Number

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(<u>NOTE</u>: The information contained in this cover letter will be included in the permanent record and will be available to the general public.)



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 1, 2009

RICHARD GOREN SHINO BAY COSMETIC DERMATOLOGY & LASER 350 E. LAS OLAS BLVD., SUITE 110 FT. LAUDERDALE, FL 33301

SUBJECT: AGELESS TRANSFORMATIONS

Ref. Number: W09000052380

We have received your document for AGELESS TRANSFORMATIONS and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

You have indicated in number 1(c) of Part I of the application that the owner and applicant of the mark will be a business entity and not an individual. Therefore, you must delete the individual's name listed in number 1(a) of Part I and insert the correct name of the appropriate business entity.

Although we received your application and check(s), no specimens were included. Section 495.031(5), F.S., requires every trademark and/or service mark application to be accompanied by three specimens (or examples). Please submit three specimens for each class of registration. (NOTE: Letterhead, stationery, envelopes, invoices and mailing labels are not accepted.)

We need three permanent specimens, which may be the same or different. TYPED or HANDWRITTEN MATERIALS ARE NOT ACCEPTABLE. We do not accept specimens which have been ALTERED or DEFACED. ANY SIZE SPECIMENS ARE ACCEPTABLE. If your mark falls under the classification of a trademark (classes 1-34), we need the labels, tags, decals, containers, boxes, wrappers or 3 LEGIBLE photographs of the goods or products with the specimen affixed. IF YOUR MARK FALLS UNDER THE CLASSIFICATION OF A SERVICE MARK (CLASSES 35-45), WE NEED SPECIMENS FROM WHICH WE CAN DETERMINE THE SERVICE(S) BEING RENDERED. We will accept magazine and-or newspaper advertisements, brochures or business cards. If business cards are submitted, we must be able to determine the services being rendered. If your mark falls under the classification of both a trade and service mark, we need specimens for both. WE WILL NOT ACCEPT LETTERHEAD STATIONERY, ENVELOPES OR INVOICES AS SPECIMENS.

Please attach your specimens to a copy of this letter or to yourcorrected

application, if it was returned to you for correction(s), and return it/them to this office for processing.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if the applicant fails to reply or resubmit the corrected/amended application within three months from date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux Document Specialist Supervisor

Letter Number: 709A00036856



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 15, 2009

RICHARD GOREN SHINO BAY COSMETIC DERMATOLOGY & LASER 350 E. LAS OLAS BLVD., SUITE 110 FT. LAUDERDALE, FL 33301

SUBJECT: AGELESS TRANSFORMATIONS

Ref. Number: W0900052380

We have received your document for AGELESS TRANSFORMATIONS and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

You have indicated in number 1(c) of Part I of the application that the owner and applicant of the mark will be a business entity and not an individual. Therefore, you must delete the individual's name listed in number 1(a) of Part I and insert the correct name of the appropriate business entity.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if the applicant fails to reply or resubmit the corrected/amended application within three months from date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

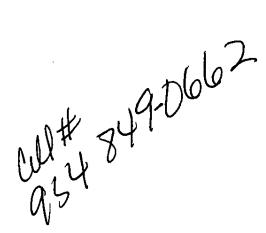
Letter Number: 209A00038170

Nanette Causseaux Document Specialist Supervisor



"The Future of Cosmetic Dermatology is Here"

1/28/10



Dear Ms. Causseaux,

I apologize if this is still incorrect. And I hope it is not too messy. I am still learning how to do this and cannot yet afford a trademark attorney as, he wanted \$24,000 to do this. (YIKES!). If anything is still incorrect please explain it simply (I am a bit slow) and I will correct immediately.

Thank you so much for your help in the past.

Hopefully, Have it 95% if not 100% correct now.

Richard E. Goren - Home Ti (56) 637-6262

R. the Product labels are not photos because I am completing a deal with HSN to sell on TV and need to trademark by before I order the minimum of 1000 bottles of each, the names are not labels, they will be Silkscreened/painted on the bottles. Slank



PPLICATION FOR THE REGISTRATION QF A TRADEMARK OR SERVICE MARK PURSUANT TO CHAPTER 495, FLORIDA STATUTES

Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 TO:

PART I	5 T
1. OWNER/APPLICANT: Enter the name and address of the individual or the business entity to be owner of the Trademark and/or Service Mark on the records of the Florida Department of State.	Fig. as the
(a) Owner's/Applicant's name:	**
(b) Owner's/Applicant's business address: Shino Boy Cosmetic Dermotology & Loser Institute	
350 E. Los Olos Blvdis Stertil 0 If different, Owner's/Applicant's mailing ad port Louderdole, FL 33301	
City/State/Zip	
(c) Owner's/Applicant's telephone number: ()	
Check the appropriate box to indicate the Owner/Applicant is a(n): Individual Corporation Joint Venture Cimited Liability Comp General Partnership Limited Partnership Union Other:	pany
If the Owner/Applicant is a business entity, the business entity must have an active filing or registration the Florida Department of State. If the Owner/Applicant is <u>not</u> an individual, enter the business entity registration/document number in #1, the state or country under the laws of which the business entity formed, organized or incorporated under in #2, and the entity's federal employer identification number (on file with ity's Florida is currently (EIN) in #3.
(1) Florida registration/document number:	$-\mathcal{N}$
(2) Domicile State or Country: (3) Federal Employer Identification Number: 20-29 8 9	_ }
2. (a) <u>SERVICE MARK</u> : If the owner/applicant is using the name, logo, design and/or slogan being connection with a type of service, the mark is a service mark. If the mark is a service mark, the app must list the specific service(s) the mark is being used in connection with. For example: furniture mov diaper services, house painting services, wholesale and retail sales of tractor equipment, etc. <u>If the own is using the mark to identify services available in the market place, enter the specific service(s) being re</u>	licant/owner ing services, ner/applicant
(Note: List only those services currently being rendered by the owner/applicant. Do not include future COSINOTO (USCU TROUTMENTS) Da Ma	services.)
Sugary and Cosmotic dermatilogy	<u> </u>
Page 1 of 4 Sun (are	reativant, Su

2. (b) TRADEMARK: If the owner/applicant is using the name, logo, design and/or slogan being registered in connection with an actual product manufactured by the owner/applicant or on the owner/applicant's behalf, the mark is a trademark. If the mark is a trademark, the applicant/owner must list the specific product(s) the name, logo, design and/or slogan is being used to identify. For example: ladies sportswear, cut food, barbecue grills, shoe laces, etc. If the owner/applicant is using the name, logo, design and/or slogan to identify goods available in the market place, enter the specific product(s) the name, logo, design and/or slogan is being used to identify:

(Note: List only those product(s) currently available. Do not include future products.)

2. (c) HOW IS THE NAME, LOGO, DESIGN AND/OR SLOGAN CURRENTLY USED:

SERVICE MARKS: If the name, logo, design and/or slogan are/is being used in connection with a type of service, you must specify the form(s)/mean(s) of advertisement the applicant/owner is using to advertise the services to the general public. For example: newspaper advertisements, business cards, brochures, flyers, pamphlets, menus, etc. If the mark is being used in connection with a type of service, state how the name, logo, design and/or slogan are/is being used in advertising here:

TRADEMARKS: If the name, logo, design and/or slogan are/is being used to identify a product manufactured by or fore the applicant/owner, you must specify how the mark is applied or affixed to the actual product or its packaging. For example: a tag, label, imprinted or engraved on the actual product, etc. If the mark is being used in connection with a specific product, state how the name, logo, design and/or slogan is applied or affixed to the actual product(s) or the packaging:

2. (d) FEE(S) AND CLASS(ES): There are a total of 45 classes or categories in which all products or services must be categorized. The fee to register a mark is \$87.50 per class. Make check payable to Florida Department of State.

List the class(es) which apply to the product(s) and/or service(s) listed in 2(a) and/or 2(b) above:

PART II

1. You must state the date the name, logo, design and/or slogan was first used in the state of Florida, and, if it was used in another state or country, the date you first used the name, logo, design and/or slogan in the other state or country. Enter the month, day, and year the name, logo, design and/or slogan was first used by the applicant/owner, the predecessor, or a related company in Florida. If the name, logo, design and/or slogan has been used in another state or country, then you must also enter the month, day, and year the name, logo, design and/or slogan was/were used in another state or country, when applicable.

Note: The Florida Statutes require a mark to be in use prior to registration.

(a) Date first used in other state or country, if applicable: 4 2 0 2008
(a) Date first used in other state or country, if applicable:
PART III
ENTER NAME, LOGO, DESIGN AND/OR SLOGAN BEING REGISTERED:
1. Enter the name, a brief description of the logo or design, and/or the slogan you are registering. The description of the logo and/or design must be 25 words or less. List the exact name, slogan, and/or description of the logo/design here: (NOTE: The name, logo, design and/or slogan listed in this section must match the exact name, logo, design and/or slogan listed on your specimens or examples.)
" Ageliss Vanskormations
Provide the English translation of any and all terms listed #1 above, when applicable:
2. DISCLAIMER STATEMENT (if applicable): Your mark may include a word or design that is commonly used by others. Commonly used terms or designs must be disclaimed. When you disclaim a specific term or design, you are acknowledging this term is commonly used by others and that you do not claim the exclusive right to use the disclaimed term or design. All geographical terms and representations of cities, states or countries must be disclaimed (i.e., Miami, Orlando, Florida, the design of the state of Florida, the design of the United States of America, etc.). Corporate suffixes and terms readily associated with the specific product(s) and/or(s) service being provided must also be disclaimed.
Enter all terms listed in #1 above which require a disclaimer in the space provided below:
NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM(S)"
" APART FROM THE MARK AS SHOWN.

3. ATTACH OR INCLUDE THREE SPECIMENS OR EXAMPLES OF THE TRADEMARK OR SERVICE MARK BEING REGISTERED

Chapter 495, F.S., requires you to submit three specimens (samples or examples) of the mark in use. <u>You must submit three specimens FOR EACH CLASS listed in Part I #2(d)</u>. The name, logo, design and/or slogan on the <u>specimens must be identical to the name, logo, design and/or slogan being registered</u>. You may provide three <u>identical specimens</u> or three <u>different specimens</u>. For each service mark class (classes 35-45), you may provide three newspaper advertisements, business cards, brochures, flyers, or any combination thereof. For each trademark class (classes 1-34), you may provide three tags, labels, boxes, etc. or any combination thereof. Photographs of bulky specimens are acceptable if the mark being registered and the good(s) or product(s) are clearly legible.

·
SIGNATURE OF APPLICANT/OWNER AND NOTARIZATION:
being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and to the best of my knowledge no other person except a related company has registered this mark in this state or has the right to use such mark in Florida either in the identical form thereof or in such near resemblance as to be likely, when applied to the goods or services of such other person to cause confusion, to cause mistake or to deceive. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated berein are true and correct.
Productive approaches the contents thereof and that the facts stated the true and correct.
Typed or printed name of applicant
Applicant's signature (list name and title)
STATE OF Floridae
COUNTY OF Brawara
On this 33 day of November ,2009, appeared before me,
who is personally known to me whose identity I proved on the basis of
MARIA ANDREA LOURIDO MY COMMISSION # DD 635558 EXPIRES: February 4, 2011 Bonded Thru Notary Public Underwritare Notary Public Signature
Notary's Printed Name
My Commission Expires:
FILING FEE: \$87.50 per class
Page 4 of 4

OFFICIAL SPECIMEN TM/SM REG.

