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September 18, 2001

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Division of Corporations
Trademark Section
P.O. Box 6327
Tallahassee, Florida 32314

~~7000004602457--9~~
~~09/20/01--01049--004~~
~~*****87.50 *****87.50~~

**RE: STATE OF FLORIDA SERVICE MARK APPLICATION:
MARK: MIAMI-DADE FITNESS RESCUE AND DESIGN**

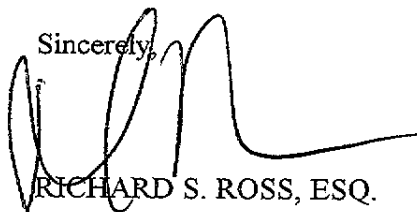
Sir: **(41)**

Enclosed please find:

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~~09/20/01--01049--004~~
~~*****87.50 *****87.50~~

- 1. A State of Florida service mark application for the above mark;
- 2. A filing fee in the amount of \$87.50; and
- 3. Specimens of the mark in use.

Please prosecute this application to registration. If you have any questions, please do not hesitate to contact us.

Sincerely,

RICHARD S. ROSS, ESQ.

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701-985

RSR/me
Enclosures

Richard Ross GAVE
AUTHORIZATION BY PHONE TO
CORRECT Part I 2. (d)
DATE 9/24/01
DOC. EXAM. nc

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 SEP 20 PM 9:50

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

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

Name & address to whom acknowledgment should be sent:

Richard S. Ross, Esq.

4801 S. University Dr., #3070

Ft. Laud., FL 33328

(954) 252-9110
Daytime Telephone number

PART I

1. (a) Applicant's name: Joseph Andrade

(b) Applicant's business address: 13282 S.W. 114th Lane, No. 1
Miami, FL 33186 City/State/Zip

(c) Applicant's telephone number: (305) 528-3488

Individual Corporation Joint Venture Other:
 General Partnership Limited Partnership Union

If other than an individual,

(1) Florida registration number: _____ (2) Domicile State: _____

(3) Federal Employer Identification Number: _____

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:
(i.e., furniture moving services, diaper services, house painting services, etc.)

PERSONAL TRAINING SERVICES FEATURING FITNESS, WELLNESS,

REHABILITATION AND NUTRITION

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:
(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

(c) The mode or manner in which the mark is used: (i.e., labels, decals, newspaper advertisements, brochures, etc.)

ADVERTISEMENTS, BUSINESS CARDS

(Continued)

d) The class(es) in which goods or services fall:

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PART II

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):
At Least As Early As 10/31/2000 / (b) Date first used in Florida: At Least As Early As 10/31/2000

PART III

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.) MIAMI-DADE FITNESS RESCUE AND DESIGN (OF A

BADGE WITH A BIRD ON TOP AND LATERALLY EXTENDED, FLEXED ARMS SHOWING
BULGING BICEPS ; THE BADGE FURTHER DEPICTING A DUMBBELL)

English Translation

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "MIAMI-DADE" and "FITNESS" APART FROM THE MARK AS SHOWN.

I, JOSEPH ANDRADE, 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 no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. 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 herein are true and correct

JOSEPH ANDRADE

Typed or printed name of applicant

Joseph Andrade - owner
Applicant's signature or authorized person's signature
(List name and title)

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

On this 13 day of September, 2001, Joseph Andrade personally appeared before me,

who is personally known to me whose identity I proved on the basis of _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
01 SEP 20 PM 9:50



**Miami-Dade
Fitness Rescue**

Joseph Andrade
Certified
Personal Training

Pager: (305) 413-3676
Cell: (305) 528-FITT

Beverly A. Brammer
Notary Public Signature

Beverly A. Brammer
Notary's Printed Name

My Commission Expires: 4/25/02
E: \$87.50 per class

