

104000000496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

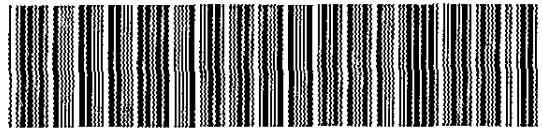
(Business Entity Name)

(Document Number)

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04 APR 14 PM 1:25
STATE
REGISTRAR
DIVISION

✓

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:

EARL C. CRAM
8460 Flamevine Avenue
Largo, FL.33777
(727) 393-3025
Daytime Telephone number

PART I

1. (a) Applicant's name: EARL C. CRAM

(b) Applicant's business address: 8460 Flamevine Avenue
Largo, FL.33777

(c) Applicant's telephone number: (727) 393-3025 City/State/Zip

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.)

(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.)

MAILBOX

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

LABELS

(Continued)

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

Class #06

PART II

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: APRIL 03, 2004 (b) Date first used in Florida: APRIL 03, 2004

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.)

SAFE-T-MAIL

English Translation SAME

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " NONE

" APART FROM THE MARK AS SHOWN.

I, EARL C. CRAM, 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

EARL C. CRAM

Typed or printed name of applicant

Earl C. Cram

/APPLICANT-OWNER

Applicant's signature or authorized person's signature (List name and title)

STATE OF FLORIDA

COUNTY OF PINELLAS

On this 9th day of April, 2004, Earl Cram

personally

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

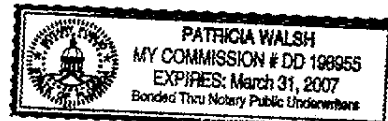
(Seal)

Notary Public Signature

Notary's Printed Name

My Commission Expires:

FEE: \$87.50 per class



04 APR 16 PM 1:25
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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Earl C. Cram

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Largo, FL.33777

(727) 383-3025 Email: ecram38@aol.com