

10500000/230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

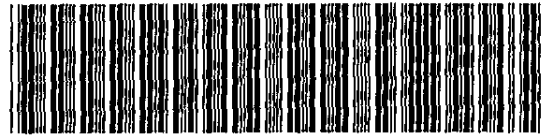
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✓ corp listed ind.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 SEP 19 PM 2:56

FILED



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

August 19, 2005

ROSDI INTERNATIONAL CORPORATION  
7800 CAMINO REAL #H-311  
MIAMI, FL 33143

SUBJECT: FULLSEX  
Ref. Number: W05000039303

We have received your document for FULLSEX 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 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.

Class(es) (5) would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) (5).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Nanette Causseaux  
Document Specialist Supervisor

Letter Number: 405A00052908

# 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:

Rosdi International Corporation

7800 Camino Real # H-311

Miami, FL 33143

( 305 ) 274 - 2349

Daytime Telephone number

## PART I

1. (a) Applicant's name: Rosdi International Corporation

(b) Applicant's business address: 7800 Camino Real # H-311

Miami, FL 33143

City/State/Zip

(c) Applicant's telephone number: ( 305 ) 274 - 2349

☐ Individual

☒ Corporation

☐ Joint Venture

☐ Other:

☐ General Partnership

☐ Limited Partnership

☐ Union

If other than an individual,

(1) Florida registration number: P04000114771

(2) Domicile State: Florida

(3) Federal Employer Identification Number: 20-1460847

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.)

Personal Enhancement Product

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

Labels, Advertisement

(Continued)

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

5: Pharmaceuticals

**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: 08/01/2005 (b) Date first used in Florida: 08/01/2005

**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.)

FULLSEX

Name written over Brown Bull (see label)

English Translation

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM " " APART FROM THE MARK AS SHOWN.

I, Diana Caballero, 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

Diana Caballero, President

Typed or printed name of applicant

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

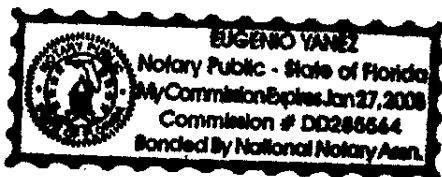
STATE OF Florida

COUNTY OF Miami-Dade

On this 15th day of August, 2005, Diana Caballero personally appeared before me,

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

(Seal)



*Eugenio Yanez*

Notary Public Signature

Eugenio Yanez

Notary's Printed Name

My Commission Expires: January 27, 2005

FEE: \$87.50 per class

FILED  
05 SEP 19 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA