

TO 6000000188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

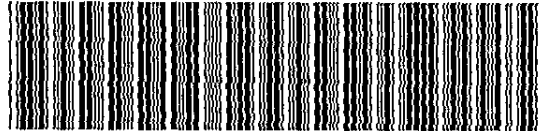
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306A00003484

W06-2376

106-188



06 FEB 15 AM 11:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: My Company logo  
(Mark 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:

Rosa Sanchez  
(Name of Person)

Ultimate Custom Pool Inc.  
(Firm/Company)

20200 SW 198 Ave  
(Address)

Miami, FL 33187  
(City/State and Zip Code)

For further information concerning this matter, please call:

Rosa Sanchez at (305) 300-0212  
(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 20, 2006

ROSA SANCHEZ  
ULTIMATE CUSTOM POOL INC.  
20200 SW 198 AVENUE  
MIAMI, FL 33187

SUBJECT: DESIGN OF MAN GETTING IN THE WATER  
Ref. Number: W06000002376

We have received your document for DESIGN OF MAN GETTING IN THE WATER and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In Part 1(2)(a) or (b) you must state the goods or services the mark is used in connection with. If the mark is a trademark, you must specify the specific goods or products. If the mark is a service mark, you must specify the exact services you are providing.

The notary public's acknowledgement is incomplete. The seal, signature, and expiration date must be affixed. A notary public cannot notarize his own signature.

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: 306A00003484

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:

Rosa Sanchez  
20200 SW 198 AVE  
Miami, FL 33187  
(305) 259-7369 - 305-303-0433  
Daytime Telephone number

PART I

1. (a) Applicant's name: Ultimate Custom Pool Inc. (Rosa Sanchez)

(b) Applicant's business address: 20200 SW 198 AVE

Miami, FL 33187  
City/State/Zip

If different, Applicant's mailing address: SAME

City/State/Zip

(c) Applicant's telephone number: (305) 259-7369

Individual

Corporation

Joint Venture

Other:

General Partnership

Limited Partnership

Union

If other than an individual,

(1) Florida registration/document number: PO5-92150 (2) Domicile State: FL

(3) Federal Employer Identification Number: 203071786

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.)

(Services) Pool Construction and leak detection

(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.)

business CARD And CAR Sign

(Continued)

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

37

**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: 06/29/05 (b) Date first used in Florida: 06/29/05

**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.)

MAN Diving Logo

English Translation

2. DISCLAIMER (if applicable)

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

I, Rosa Sanchez, 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

Rosa Sanchez

Typed or printed name of applicant

*[Signature]*

Applicant's signature (List name and title)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 FEB 15 AM 11:36

FILED

STATE OF Florida

COUNTY OF Dade

On this 6<sup>th</sup> day of February, 2006, Rosa Sanchez personally appeared before me,

who is personally known to me  whose identity I proved on the basis of driver's license

**Ultimate Custom Pool, Inc**  
Specialist Leak Detection

*[Signature]*

Notary Public Signature

Damaris Castillo

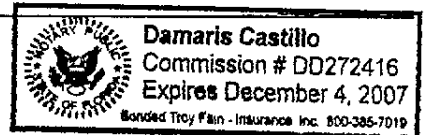
Notary's Printed Name

- \* Underwater Dye Test of Pool Shell
- \* Pressure Test Plumbing System
- \* Ultrasonic and Electronic Check



- \* We Pinpoint and Repair Hidden Swimming Pool and Spa Leaks
- \* Construction

Commission Expires: \$87.50 per class



Commercial & Residential  
20200 SW 198 Ave. Office: (305) 259-7369  
Miami, FL 33187 \* All Work Guaranteed \* Fax: (305) 259-2017