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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

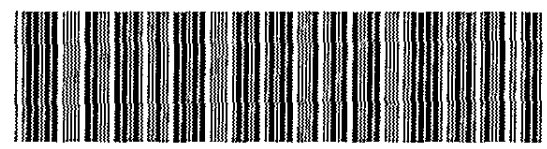
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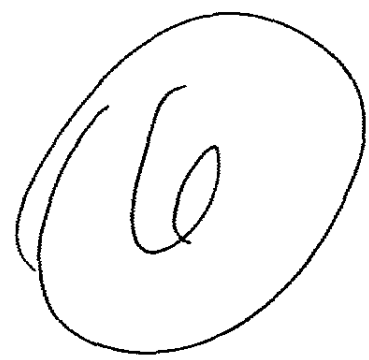
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FILED
07 JUL 16 PM 12:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 100 Percent Referral Network
(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:

Scott Forbes
(Name of Person)

King Real Estate Services, Inc.
(Firm/Company)

1212 E. Broward Blvd, Ste 204
(Address)

Ft. Lauderdale, FL 33301
(City/State and Zip Code)

For further information concerning this matter, please call:

Megan Taylor at 954, 4107-7557
(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

(NOTE: 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

June 7, 2007

SCOTT FORBES
KING REAL ESTATE SERVICES, INC.
1212 E. BROWARD BLVD., SUITE 204
FT. LAUDERDALE, FL 33301

SUBJECT: 100 PERCENT REFERRAL NETWORK
Ref. Number: W07000027186

We have received your document for 100 PERCENT REFERRAL NETWORK and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

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.

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: 707A00038933

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

PART I

1. (a) Applicant's name: King Real Estate Services, Inc.
(b) Applicant's business address: 1212 East Broward Blvd. Ste 204
 Ft. Lauderdale, FL 33301
City/State/Zip

If different, Applicant's mailing address: _____
City/State/Zip

(c) Applicant's telephone number: 954 4107-7557
 Individual Corporation Joint Venture Limited Liability Company
 General Partnership Limited Partnership Union Other: _____

If other than an individual,
(1) Florida registration/document number: PO7000015381 ✓ (2) Domicile State: Florida
(3) Federal Employer Identification Number: 20-8428110

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.)
Real Estate Services

(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.)
NIA

(c) The specific way the mark is applied to the good(s) or used in advertising:(i.e., labels, decals, newspaper advertisements, brochures, etc.)
brochures, Magazine advertisements, business cards,

d) The class(es) in which goods or services fall:
Class 36

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: 5/15/07 (b) Date first used in Florida: 5/15/07

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.)

100 percent Referral Network

FILED
07 JUL 16 PM 4:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

English Translation _____

2. DISCLAIMER (if applicable)

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

I, Colleen Forbes, 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 herein are true and correct.

Colleen Forbes

Typed or printed name of applicant

[Signature]

Applicant's signature
(List name and title)

STATE OF Florida

COUNTY OF Brevard

On this 31 day of May, 2007, Colleen Forbes personally appeared before me,

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

FL 12-100-82-763-0
exp 9-21-07

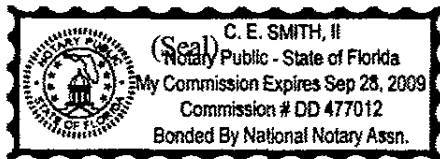
[Signature]

Notary Public Signature

C.E. Smith II

Notary's Printed Name

My Commission Expires: 9-28-09



FILING FEE: \$87.50 per class

With the click of a button...



Check out...

www.100percentreferral.com

or

www.exitrealtyflorida.com

to view the listings available!

