

T96000000994

Requester's Name
FRANCISCO RODRIGUEZ
850 West 49th St #407
HIALEAH, FL, 33012

000001933270
-08/27/96--01126--011
*****87.50 *****87.50
Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

96 AUG 26 AM 10:00
FILED

Examiner's Initials

T96000000994

Florida Department of State, Sandra B. Mortham, Secretary of State

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 acknowledgement should be sent:

FRANCISCO RODRIGUEZ
850 WEST 49TH STREET #407
HIALEAH FLORIDA 33012
(305) 826-2614
Daytime Telephone number

PART I

1. (a) Applicant's name: FRANCISCO RODRIGUEZ

(b) Applicant's business address: 850 WEST 49TH STREET #407

HIALEAH, FL. 33012
City/State/Zip

(c) Applicant's telephone number: (305) 826-2614

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.)

PHOTOGRAPHY AND VIDEO PRODUCTION SERVICE

(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.)

THE MARK IS USED TO IDENTIFY THE SERVICE IN VIDEO TAPE, LABELS,
BUSINESS CARDS, BROCHURES, MAGAZINE ADVERTISEMENTS AND THE
YELLOW PAGES OF THE LOCAL EDITION OF THE PHONE BOOK

(Continued)

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

CLASS 42: MISCELLANEOUS

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 19, 1994 (b) Date first used in Florida: APRIL 19, 1994

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.)

TWINS VIDEO PRODUCTIONS

MARGENTA TRIANGLE WITH THE WORDS TWINS VIDEO IN A COLOR GRADIENT
YELLOW TO ORANGE OVER THE UPPER SIDES, THE WORD PRODUCTIONS
UNDERNEATH THE BOTTOM SIDE.

2. DISCLAIMER (if applicable)

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

I, FRANCISCO RODRIGUEZ, 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.

FRANCISCO RODRIGUEZ

Typed or printed name of applicant

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

STATE OF FL

COUNTY OF DADE

On this 21 day of AUGUST, 19 96, _____ personally appeared before me,

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

[Signature]
Notary Public Signature

JIM SIERRA
Notary's Printed Name

Seal

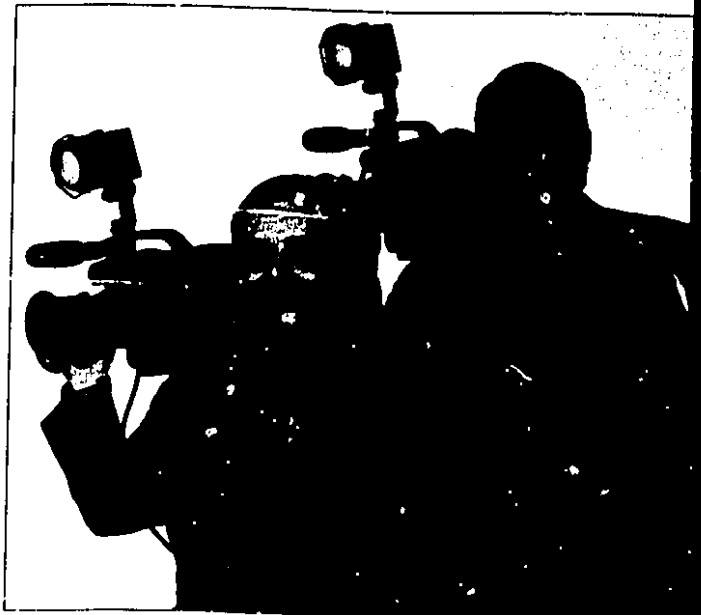
My Commission Expires:

FEE: \$87.50 per class



Tony and Frank are sure to provide you with the quality and professional service you seek. Two camera synchronization (part of which comes naturally) and state of the art post-production and special effects. We offer our customers an affordable option to the one camera video packages available. We care enough to attend each booking personally. When we hand you the finished video you can be assured that it is done with your wishes and our touch from start to finish.

TWINNS VIDEO PRODUCTIONS



"We do what we know best"

Professional Quality Video

**Frank & Tony Rodriguez
Twins Video Productions
Tel: (305) 826-2614
Bpr: (305) 366-9606**

Se Habla Español

**Anniversaries
Weddings
Quince
Birthdays
Special Events**

EVENTOS

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