



# Trademark Status Report

Case Number	Trademark Name	Class	Country	Status	Application Number	Filing Date	Reg Number	Reg Date	Renewal Date
ENET30.006T	PROFITSCAPE	42	US	Transfere	75/421960	1/22/1998			
ENET30.007T	ENET30	36	US	Transfere	75/906668	1/31/2000			
<del>ENET36.009T</del>	<del>PROFITSCAPE</del>	<del>36</del>	<del>US</del>	<del>Transfere</del>					
ENET30.010T	CREDITSCAPE	9,36	US	Transfere	76/083274	7/12/2000			
ENET30.012T	ENET60	36 AND 42	US	Transfere	76/103946	8/4/2000			
ENET30.013T	ENET90	36,42	US	Transfere	76/103939	8/4/2000			
ENET30.017T	ENET30	36, 42	US	Transfere	76/103938	8/4/2000			

Tuesday, February 15, 2005

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Case Number      Trademark Name      Class      Country      Status      Application Number      Filing Date      Reg Number      Reg Date      Renewal Date

ENET30.420T      ENET30           US      ~~Transfere~~

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Document Number:

2005008989-4

Filing Date and Time:

03-25-2005 09:06 AM

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)  
**Cristina Diaz (949) 721-5263**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Knobbe, Martens, Olson & Bear, LLP  
 Attn: Cristina Diaz  
 2040 Main Street  
 14th Floor  
 Irvine, CA 92614**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME <b>ENET30, INC.</b>						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS <b>4475 SOUTH PECOS ROAD</b>			CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	POSTAL CODE <b>89121</b>	COUNTRY <b>US</b>
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION <b>Corp.</b>	1f. JURISDICTION OF ORGANIZATION <b>NV</b>	1g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME <b>PROFITSCAPE, INC.</b>						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS <b>4475 SOUTH PECOS ROAD</b>			CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	POSTAL CODE <b>89121</b>	COUNTRY <b>US</b>
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION <b>Corp.</b>	2f. JURISDICTION OF ORGANIZATION <b>NV</b>	2g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR SP) - Insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>Knobbe, Martens, Olson &amp; Bear, LLP</b>						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS <b>2040 Main Street, 14th Floor</b>			CITY <b>Irvine</b>	STATE <b>CA</b>	POSTAL CODE <b>92614</b>	COUNTRY <b>US</b>

4. This FINANCING STATEMENT covers the following collateral:

"All of debtor's intellectual property which is the subject of secured party's representation, on any recoveries from litigation involving such intellectual property and on any other proceeds of such intellectual property, including but not limited to the property described on Attachment A hereto."

See Attached Exhibit "A"

5. ALTERNATIVE DESIGNATION (if applicable)	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOB	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)		All Debtors	Debtor 1	Debtor 2	
8. OPTIONAL FILER REFERENCE DATA <b>ENET30/PSCAPE</b>						

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)

RECORDED: 04/06/2005

TRADEMARK  
REEL: 003146 FRAME: 0106