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12-12-2000

FORM PTO-1595  
(Rev. 6-93)  
OMB No. 0651-0011 (exp. 4/94)

RE



EET

U.S. DEPARTMENT OF  
COMMERCE  
Patent and Trademark Office

To the Honorable Commissioner of

101547405

Attached original documents or copy thereof.

1. Name of conveying party(ies):

APPLIED VASCULAR DEVICES, INC.

2. Name and address of receiving party(ies)

Name: APPLIED MEDICAL RESOURCES CORPORATION  
Internal Address: 22872 Avenida Empresa  
Street Address: Rancho Santa Margarita, CA 92688

Additional name(s) of conveying party(ies) attached?  Yes  No

Additional name(s) & address(es) attached?  Yes  No

3. Nature of conveyance:

- Assignment  Merger
- Security Agreement  Change of Name
- Other: \_\_\_\_\_



10-27-2000

U.S. Patent & TMO/TM Mail Rcpt Dt: #70

Execution Date: July 26, 1996

4. Application number(s) or registration number(s):

If this document is being filed together with a new application, the execution date of the application is: \_\_\_\_\_

A. Trademark Application No.(s): \_\_\_\_\_ B. Trademark No. (s): 1,574,650

Additional numbers attached?  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Richard L. Myers  
Internal Address: Applied Medical Resources Corporation  
Street Address: 22872 Avenida Empresa  
Rancho Santa Margarita CA 92688

6. Total number of applications and trademarks involved: one (1)

7. Total fee (37 CFR 3.41): \$ 40.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number: 01-2215

(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

RICHARD L. MYERS  
Name of Person Signing

*Richard L. Myers*  
Signature

10/27/00  
Date

Total number of pages including cover sheet, attachments and document: 3

Mail documents to be recorded with required cover sheet information to  
Commissioner of Patents & Trademarks, Box assignments  
Washington, D.C. 20231

ASSIGNMENT

THIS ASSIGNMENT is effective as of July 26, 1996.

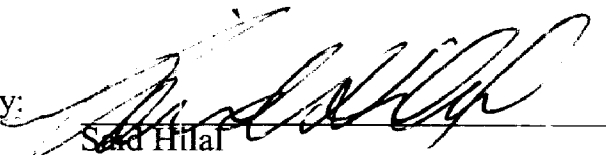
WHEREAS, APPLIED VASCULAR DEVICES, INC., a California corporation, having a place of business at 22872 Avenida Empresa, Rancho Santa Margarita, California 92688 (hereinafter referred to as "Assignor") has adopted and used in its business the trademark "FIBRA" and design, and has obtained a registration thereof in the United States, Registration No. 1,574,650, dated January 2, 1990 (hereinafter referred to as "Trademark"), and up to the effective date of this Assignment has been the owner of the entire right, title, and interest in and to the trademark, and the goodwill of the business in connection with which the trademark is used, and the Registration relating to the trademark; and

WHEREAS, as of the effective date of this Assignment, APPLIED MEDICAL RESOURCES CORPORATION, a corporation of California, having a place of business at 22872 Avenida Empresa, Rancho Santa Margarita, California 92688 (hereinafter referred as "Assignee") has succeeded to the entire business, including the goodwill and all trademark rights of Assignor, including the Trademark and the Registration, above mentioned.

NOW, THEREFORE, as of the effective date of this Assignment, and for good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, the Assignor does hereby sell, assign, and transfer unto the Assignee the entire right, title, and interest in and to the trademark in all countries of the world together with the goodwill of the business symbolized thereby and all applications for registration and registrations thereof, including, but not limited to, that listed above relating to the Trademark.

IN WITNESS WHEREOF, the undersigned Assignor has executed this Assignment, effective as of the date first appearing above.

By:

  
Said Hilal  
President

# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Orange } ss.

On 10/27/00  
personally appeared

before me,

Gabrie Pakstys  
Name and Title of Officer (e.g. "Jane Doe, Notary Public")

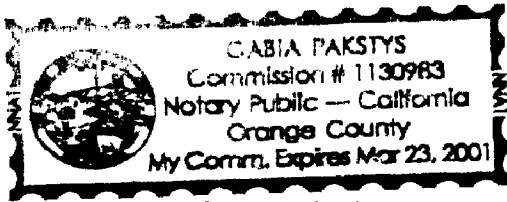
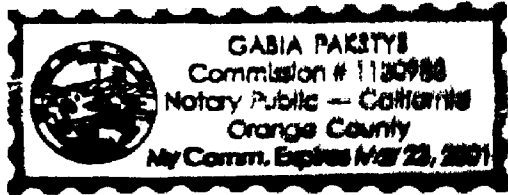
Said files  
Name(s) of Signer(s)

personally known to me  
 proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument

WITNESS my hand and official seal

Gabrie Pakstys  
Signature of Notary Public



Place Notary Seal Above

## OPTIONAL

*Though the information below is not required by law, it may prove valuable to persons relying on the document and to help prevent fraudulent removal and reattachment of this form to another document.*

### Description of Attached Document

Title or Type of Document

Document Date

Number of Pages:

Signer(s) Other Than Named Above

### Capacity(ies) Claimed by Signer

Signer's Name:

Individual

Corporate Officer -- Title(s)

Partner -- Limited General

Attorney in Fact

Trustee

Guardian or Conservator

Other

Signer is Representing

RIGHT THUMBPRINT OF SIGNER

Trace of thumbprint