FORM PTO-1594 (Rev. 6-93)	12-28-	2000	SHEET		IT OF COMMERCE of Trademark Office
OMB No. 0651-0011 (exp. 4/94)			Y		
Tab settings □ □ □ ▼				▼	▼
To the Honorable Commissioner of Pa	101565	270	tached original	documents or copy	thereof.
1. Name of conveying party(ies):		2. Name and address of receiving party(ies)			
Roberts Laboratories Inc. (人() ()		Name: Lee Pharmaceuticals, Inc.			
	12.4.W	Internal Ad	ldress:		
☐ Individual(s) ☐ Association ☐ General Partnership ☐ Limited Partnership		Street Ado	iress. 1434 S	anta Anita Av	enue
		Street Address: 1434 Santa Anita Avenue City: South El Monte State: CA ZIP: 91273			
☑ Corporation-State New Jersey		City:		_ State: <u>~ 1 </u>	_ZIP: <u>31273</u>
☐ OtherAdditional name(s) of conveying party(ies) attached? ☐ Yes ※3x No				ip	
		☐ Association			
3. Nature of conveyance:	•	□ I imited	Partnership		
	☐ Merger			California	
	☐ Change of Name	_		d States a demostic rea	
Other	If assignee is not domiciled in the United States, a domestic representative designation is attached: Q Yes Q No				
Execution Date: October 26, 1996	(Designations must be a separate document from assignment) Additional name(s) & address(es) attached? □ Yes □ No				
4. Application number(s) or patent numb	er(s):				
4. Application name of the parent name	(-).	l			
A. Trademark Application No.(s)	B. Trader	nark Registrati	on No.(s)		
		5.	36 , 745		
	Additional numbers at	tached? 🗆 Yes 🔯 !	No		
5. Now and address of party to whom a	orraenandenaa	6 Total num	ber of applicati	ions and	
Name and address of party to whom of concerning document should be maile				1	
Charles W. Chandler					
Name:		7. Total fee (37 CFR 3.41)\$ 40.00			
Internal Address:					
		☐ Enclos	sed		
		🖺 Authoi	rized to be cha	rged to deposit ac	count
Street Address: 33150 Schoolcra	aft, Ste. 207	O. Damanita			
		·	ccount number	•	
City: Livonia State: MI	ZIP: 48150	5	01280		
City:State: \	ZIF	(Attach dupl	icate copy of this p	page if paying by depo	osit account)
	DO NOT US	E 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.					
Charles W. Chandler	1		11	1/30/00	
Name of Person Signing / Signature 5 Date					
	number of pages including	•	nents, and docume	ent: 5	

ASSIGNMENT

The undersigned, ROBERTS LABORATORIES INC., a New Jersey corporation, having its principal office at Meridian Center II, Four Industrial Way West, Eatontown, New Jersey 07764-2271, for good and valuable consideration to it in hand paid, the receipt whereof is hereby acknowledged, does hereby sell, assign and transfer to LEE PHARMACEUTICALS, INC., a California corporation, having its principal office at 1434 Santa Anita Avenue, South El Monte, California 91273, the entire right, title and interest in and to all trademarks, tradenames, labels, copyrights, licenses, proprietary registrations, patents and designs of the undersigned and all registrations and applications for registration thereof, in the world for:

ALKETS

BACIGUENT

CALCIUM LACTATE

CHLOR-PHED or CHLORAFED

CITROCARBONATE

CLOCREAM

CLOMYCIN

DIOSTATE D

GERAVITE

HALTRAN

KASOF

LIPOMUL

MYCIGUENT

NIACELS

OREXIN

ORTHOXICOL

P-A-C

PROBEC-T

PROCORT

PYRROXATE

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VADEMIN Z

ZYMACAP

B-C BID

CEVI-BID

GERITONIC

NIA BID

and made a part hereof, together with the goodwill of the business in connection with which all of the foregoing are used.

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TRADEMARK REEL: 002201 FRAME: 0205 The undersigned agrees that it will execute and deliver to the assignee such further documents as the assignee may reasonably request to effectuate this assignment.

IN WITNESS WHEREOF, the undersigned has caused this instrument to be signed by its duly authorized officers and its corporate seal to be hereunto affixed, as of the 21 structure of the day of October, 1996.

ROBERTS LABORATORIES INC.

Зу:<u></u>____.

_, Presiden

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STATE OF NEW JERSEY)

1996, before me, And ha arin, personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal

DEBORAH MOSKOWITZ NOTARY PUBLIC OF NEW JERSEY MY COMMISSION EXPIRES MAY 27, 2001

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TRADEMARK

REEL: 002201 FRAME: 0207