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09-24-2001



SEP 6

Form PTO-1594 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002)		RECORD TRADEMARKS ONLY		101853091		DEPARTMENT OF COMMERCE Patent and Trademark Office	
Tab settings							
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.							
1. Name of conveying party(ies): Computer Horizons Corporation				2. Name and address of receiving party(ies) Name: Chimes, Inc.			
<input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State New York <input type="checkbox"/> Other _____				Internal Address: _____ Address: _____ Street Address: 49 Old Bloomfield Ave. City: Mountain Lakes State: NJ Zip: 07046 <input type="checkbox"/> Individual(s) citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <input type="checkbox"/> Limited Partnership _____ <input checked="" type="checkbox"/> Corporation-State Delaware <input type="checkbox"/> Other _____			
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other Corrective Document*				Execution Date: May 8, 2001			
4. Application number(s) or registration number(s): A. Trademark Application No.(s) 75/503,499				B. Trademark Registration No.(s)			
Additional number(s) attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Jennifer Silver, Esq.				6. Total number of applications and registrations involved: 8			
Internal Address: Proskauer Rose LLP				7. Total fee (37 CFR 3.41).....\$ 40.00			
Street Address: 1585 Broadway				<input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account			
09/21/2001 AA-MED1 00000052 162500 75503499 40.00 CH City: New York State: NY Zip: 10036				8. Deposit account number: 16-2500			
(Attach duplicate copy of this page if paying by deposit account)							
DO NOT USE THIS SPACE							
9. Statement and signature. <i>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.</i>							
Jennifer Silver, Esq.						September 6, 2001	
Name of Person Signing				Signature		Date	
Total number of pages including cover sheet, attachments, and document: 7							

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

* Record to remove Trademark Registration 2,079,724 inadvertently included in a schedule previously recorded at Reel/Frame 2306/0612 on May 14, 2001.

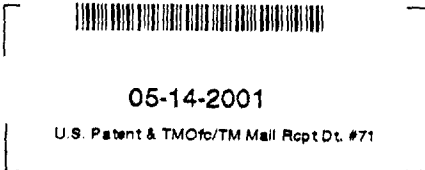
TRADEMARK
REEL: 002372 FRAME: 0335

SCHEDULE A

Mark	Reg No.	Serial No.	Reg. Date	Filing Date
CHIMES	-----	75/503,499	-----	6/16/98
CHIMES	-----	76/128,638	-----	9/14/00
SIGNATURE CHIC 2000 & Design	2,079,724	74/646,316	7/15/97	4/13/95
CHIMES & Design	-----	76/091,487	-----	7/18/00
CHIMESTART	-----	76/086,675	-----	7/11/00
CHIMESHARE	-----	76/086,676	-----	7/11/00
CHIMESOURCE	-----	76/086,677	-----	7/11/00
CHIMESOFT	-----	76/086,678	-----	7/11/00

SS
9/14/00

5.14.01



05-31-2001
~~Barcode~~
101734304

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)
Document ID # _____
- Correction of PTO Error
Reel # _____ Frame # _____
- Corrective Document
Reel # _____ Frame # _____

Conveyance Type

- Assignment License
 - Security Agreement Nunc Pro Tunc Assignment
 - Merger Change of Name
 - Other Assignment
- Effective Date
Month Day Year
May 8, 2001

Conveying Party

Mark if additional names of conveying parties attached
Execution Date
Month Day Year
May 8, 2001

Name Computer Horizons Corporation

Formerly _____

- Individual General Partnership Limited Partnership Corporation Association
- Other _____
- Citizenship/State of Incorporation/Organization New York

Receiving Party

Mark if additional names of receiving parties attached

Name Chimes, Inc.

DBA/AKA/TA _____

Composed of _____

Address (line 1) 49 Old Bloomfield Avenue

Address (line 2) _____

Address (line 3) Mountain Lakes NJ 07046
City State/Country Zip Code

- Individual General Partnership Limited Partnership If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)
- Corporation Association
- Other _____
- Citizenship/State of Incorporation/Organization Delaware

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

#

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

<input type="text" value="75503499"/>	<input type="text" value="76128638"/>	<input type="text" value="76091487"/>	<input type="text" value="2079724"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="76086675"/>	<input type="text" value="76086676"/>	<input type="text" value="76086677"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="76086678"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of Properties

Enter the total number of properties involved.

#

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed

Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes

No

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. Charges to deposit account are authorized, as indicated herein.

Jennifer Silver, Esq.

May 14, 2001

Name of Person Signing

Signature

Date Signed

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
ASSIGNMENT OF U.S. TRADEMARKS

WHEREAS, Computer Horizons Corporation, a New York corporation located and doing business at 49 Old Bloomfield Avenue, Mountain Lakes, New Jersey 07046 ("Assignor"), has adopted, used and is using the trademarks listed on Schedule A attached hereto (the "Marks"); and

WHEREAS, Assignor owns the U.S. Trademark Registration and Applications listed on Schedule A attached hereto (the "U.S. Trademark Registration and Applications"); and

WHEREAS, Chimes, Inc., a Delaware corporation located and doing business at 49 Old Bloomfield Avenue, Mountain Lakes, New Jersey 07046 ("Assignee"), desires to obtain all rights in and to the Marks and the U.S. Trademark Registration and Applications.

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Assignor hereby assigns, transfers, conveys and delivers to Assignee all right, title and interest in and to the Marks, the U.S. Trademark Registration and Applications and all other registrations and applications to register the Marks, the right to recover for any and all past infringements of the Marks, and the goodwill of the business in connection with which the Marks are used.

IN WITNESS WHEREOF, Assignor has caused this Assignment to be executed as of this 8 day of May, 2001.

COMPUTER HORIZONS CORPORATION

By: Michael J. Shea
Name: Michael J. Shea
Title: V.P. Controller