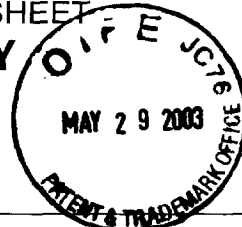


06-03-2003



COVER SHEET  
S ONLY



Our Ref.: 4014-53

**Mail Stop Assignment Recordation Services**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

102462069

S. 29.03

To the Commissioner for Trademarks: Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies): IntesaBci S.p.A.</p> <p><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: Italy  <input type="checkbox"/> Other: _____</p> <p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment                              <input type="checkbox"/> Merger  <input type="checkbox"/> Security Assignment                  <input checked="" type="checkbox"/> Change of Name  <input type="checkbox"/> Other: _____</p> <p>Execution Date: <u>January 1, 2003</u></p>	<p>2. Name and address of receiving party(ies): Name: <u>Banca Intesa S.p.A.</u>  Internal Address: _____  Street Address: <u>Piazza Paolo Ferrari 10</u>  _____  City: <u>20121 Milano</u>  State/Country: <u>ITALY</u>  Zip: _____</p> <p><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 <u>ITALY</u>  <input type="checkbox"/> Other _____</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>(NOT NECESSARY FOR CHANGE OF NAME)</b>  Designations must be a separate document from Assignment)  Additional name/s &amp; address/es attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
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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: \_\_\_\_\_

<p>A. Trademark Application No.(s)  (1) <u>76/449,525</u>  (2) _____  (3) _____</p>	<p>B. Trademark Registration No.(s)  (1) _____  (2) _____  (3) _____</p>
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Additional numbers attached?  Yes  No

<p>5. Name and address of party to whom correspondence concerning document should be mailed:  Name: <u>Frank P. Presta</u>  Internal Address: _____  _____  Street Address: <u>Nixon &amp; Vanderhye P.C.</u>  <u>1100 North Glebe Road</u>  <u>8th Floor</u>  City <u>Arlington</u> State: <u>VA</u> Zip: <u>22201</u></p>	<p>6. Total number of applications and registrations involved: <u>1</u></p> <p>7. Total fee (37 CFR 3.41) \$ <u>40.00</u>  <input checked="" type="checkbox"/> Enclosed  <input type="checkbox"/> Authorized to be charged to deposit account #14-1140</p> <p>8. The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this firm) to our <b>Account No. 14-1140.</b></p>
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DO NOT USE THIS SPACE

9. Statements 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.

Frank P. Presta                      *Frank P. Presta*                      May 29, 2003  
Name of Person Signing                      Signature                      Date

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

FPP:142

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6/26/02/2003 EDDOPER  
91 FT. 0521

SUPPORTING DOCUMENTATION FOR TRADEMARK  
CHANGE OF NAME DOCUMENTS IS

NO LONGER REQUIRED

UNDER THE

TRADEMARK LAW TREATY ACT

EFFECTIVE

OCTOBER 30, 1999