

06-08-2004

6/4/04



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**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**

FINANCE SECTION

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

Effective Date
Month Day Year

Conveying Party

Mark if additional names of conveying parties attached

Name Execution Date
Month Day Year

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)
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

06/07/2004 6T0M11 00000040 76486888
01 FC:8521 40.00 DP

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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

TRADEMARK
REEL: 002986 FRAME: 0617

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)

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.

Margaret Polson Reg. No. 42,082

6/1/04

Name of Person Signing

Signature

Date Signed

09-22-2003



102555317

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 #

9.2.03

Conveyance Type

- Assignment License
- Security Agreement Nunc Pro Tunc Assignment
- Merger
- Change of Name
- Other

Effective Date
Month Day Year
August 25, 2003

Conveying Party

Mark if additional names of conveying parties

Name

Execution Date
Month Day Year
August 25, 2003

Formerly

- Individual General Partnership Limited Partnership Corporation Association
- Other

Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

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- Corporation Association
- Other

Citizenship/State of Incorporation/Organization

09 1772003 DBYRNE 00000144 76486888

01 FC:8521

40.00 DP

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Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK

REEL: 002986 FRAME: 0619

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="76/486,888"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

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<input type="text"/>	<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.

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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:

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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.

Margaret Polson Reg. No. 42,082

8/27/03

Name of Person Signing

Signature

Date Signed

Assignment

WHEREAS, Tri-Angels, LTD, a Cayman Islands corporation having as its principle residence 802 Grand Pavilion Commercial Center, P.O. Box 10335 APO, W. Bay Road, GrandCayman Islands, BWI, Cayman Islands, has adopted, used, and is using and is the owner of the following mark for which an application is now pending in the United States Patent and Trademark Office:

Trademark	Application No	Filed
CUTS	76/486,888	01/30/03

WHEREAS, Cuts Fitness for Men, LLC, a New Jersey corporation having its principal offices at 109 Lefferts Lane, Clark, New Jersey 07066, is desirous of acquiring said mark and the application as part of the entire business for portion thereof to which the mark pertains, as required by 15 U.S.C. Sec. 1060.

NOW, THEREFORE, in consideration of the sum of One Dollar (\$1.00) and other good and valuable consideration, the receipt of which is hereby acknowledged, Tri-Angels, LTD hereby assigns to Cuts Fitness for Men, LLC as assignee, and its successors, assigns and legal representatives, the entire right, title and interest, for all countries in and to said service marks and said applications therefor, together with the goodwill of the business symbolized by said mark and said application to register said mark and all causes of action for the infringement of such mark.

Tri-Angels, LTD covenants with said assignee, its successors, assigns and legal representatives, that the rights and property herein conveyed are free and clear of any encumbrance, and that he has full right to convey the same as herein expressed.

The Commissioner of Patents and Trademarks is requested to issue the Certificate of Registration to said assignee, Cuts Fitness for Men, LLC.

Signed at Clark NJ this 25th day of August, 2003

[Signature] (L.S.)
John Gennaro

State of New Jersey

ss:

County of Union

On this 25th day of August, 2003, personally appeared John Gennaro, to me known, and acknowledged that he executed the foregoing Assignment.

[Signature]
Notary Public

My commission expires on Sept 20 2003

GARY A. GENNARO
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires Sept. 20, 2006

