

Form PTO-1594 (Rev. 06/04)
OMB Collection 0651-0027 (exp. 6/30/2005)

U.S. DEPARTMENT OF COMMERCE
United States Patent and Trademark Office

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)/Execution Date(s):

TARO PHARMACEUTICALS
U. S. A., INC.

- Individual(s)
- General Partnership
- Corporation-State NEW YORK
- Other _____

Citizenship (see guidelines) _____

Execution Date(s) _____

Additional names of conveying parties attached? Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: TARO PHARMACEUTICALS

Internal Address: NORTH AMERICA, INC.

Street Address: C/O CIOSE BROTHERS

City: P.O. BOX 1304 GT. HARBOUR PLACE, 4TH FLOOR, 103 CHURCH ST.

State: GRAND CAYMAN

Country: _____ Zip: CAYMAN ISLANDS

- Association
- General Partnership
- Limited Partnership
- Corporation
- Other _____

Citizenship _____
If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)

78/196, 822

B. Trademark Registration No.(s)

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

IT'S EVERYTHING YOUR FEET NEED

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

Name: MICHAEL A. DAVITZ, ESQ.

Internal Address: C/O IP Dept. TARO PHARMACEUTICALS USA,

Street Address: Three Skyline Dr. Inc

City: Hawthorne

State: NY Zip: 10532

Phone Number: (914) 345-9001

Fax Number: (914) 347-5376

Email Address: _____

6. Total number of applications and registrations involved:

1

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$40.00

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

8. Payment Information:

a. Credit Card Last 4 Numbers _____
Expiration Date _____

b. Deposit Account Number 50-2392

Authorized User Name _____

9. Signature:

MICHAEL A. DAVITZ, M.D., J.D.

Name of Person Signing

MARCH 1, 2005

Date

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

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

CH \$40.00 502392 78196822

ASSIGNMENT OF TRADEMARKS

WHEREAS, Taro Pharmaceuticals U.S.A., Inc., a New York corporation having its principal place of business at 5 Skyline Drive, Hawthorne, New York 10532 is desirous of assigning and Taro Pharmaceuticals North America, Inc., c/o Close Brothers (Cayman Limited), P.O. Box 1034 GT, Harbour Place, 4th Floor, 103 Church Street, Grand Cayman, Cayman Islands is desirous of acquiring certain trademark rights relating to Taro Pharmaceuticals U.S.A., Inc.'s KERASAL line; and

WHEREAS, Taro Pharmaceuticals North America, Inc. wishes to acquire the entire right, title and interest in, to and under the trademark application listed on the attached Exhibit A (the "Mark"); and

NOW THEREFORE, for the good and valuable consideration, to it in hand paid by Taro Pharmaceuticals North America, Inc., and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Taro Pharmaceuticals U.S.A., Inc. does hereby sell, assign, transfer and set over to Taro Pharmaceuticals North America, Inc. all of Taro Pharmaceuticals U.S.A., Inc.'s right, title and interest in, to and under the Mark, and all applications and renewals in connection therewith, together with the goodwill of the business symbolized by the Mark, together with all rights and privileges granted and secured thereby, including the right to sue and recover for any past infringement, the rights to be held and enjoyed by Taro Pharmaceuticals North America, Inc., for its own use and benefit and for the use and benefit of its successors, assigns or other legal representatives as fully and entirely as the same would have been held and enjoyed by Taro Pharmaceuticals U.S.A., Inc. if this Assignment and sale had not been made.

IN TESTIMONY WHEREOF, Taro Pharmaceuticals U.S.A., Inc. has executed this Assignment by its proper officers duly authorized this 23rd day of February, 2005.

Assignor:

TARO PHARMACEUTICALS U.S.A., INC.

Assignee:

TARO PHARMACEUTICALS
NORTH AMERICA, INC.

Signature: _____



Signature: _____



Name: _____

KALPANA RAO

Name: _____

ABRAHAM YACOBI, Ph.D.

Office: _____

V.P - RA (GLOBAL)

Office: _____

Sr. VP, (KAS)

EXHIBIT A

Trademark Application/ Registration No.	Mark
U.S. Appln. No. 78/196,822	IT'S EVERYTHING YOUR FEET NEED