

Form PTO-1594 (Rev. 03/05)  
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):**

Richard L. Aloj  
1935 SW 8th Street  
Boca Raton, FL 33486

- Individual(s)       Association
- General Partnership       Limited Partnership
- Corporation- State: \_\_\_\_\_
- Other \_\_\_\_\_

Citizenship (see guidelines) \_\_\_\_\_

Additional names of conveying parties attached?  Yes  No

**2. Name and address of receiving party(ies)**

Additional names, addresses, or citizenship attached?  Yes  No

Name: Aero Pharmaceuticals, Inc.

Internal

Address: \_\_\_\_\_

Street Address: 3848 FAU Blvd., Suite 100

City: Boca Raton

State: FL

Country: USA

Zip: 33431-6437

- Association      Citizenship \_\_\_\_\_
- General Partnership      Citizenship \_\_\_\_\_
- Limited Partnership      Citizenship \_\_\_\_\_
- Corporation      Citizenship \_\_\_\_\_
- 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)

**3. Nature of conveyance / Execution Date(s) :**

Execution Date(s) 07/26/04

- Assignment       Merger
- Security Agreement       Change of Name
- Other \_\_\_\_\_

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

A. Trademark Application No.(s)

78/136211

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):**

Mark: AEROKID

Filing Date: 6/17/02

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

Name: Diana Shahinian

Internal Address: \_\_\_\_\_

Street Address: 3848 FAU Blvd., Suite 100

City: Boca Raton

State: FL      Zip: 33431

Phone Number: 800-223-6837

Fax Number: 800-414-1202

Email Address: \_\_\_\_\_

**6. Total number of applications and registrations involved:**

1

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

- 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 \_\_\_\_\_

Authorized User Name \_\_\_\_\_

**9. Signature:**

Diana Shahinian  
Signature

4/14/05  
Date

Diana Shahinian

Name of Person Signing

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

TRADEMARK ASSIGNMENT

WHEREAS, Richard L. Aloï ("Assignor"), an individual with an address 1935 S.W. 8<sup>th</sup> Street, Boca Raton, Florida 33486, is the owner of the trademark listed below (the "Mark"); and

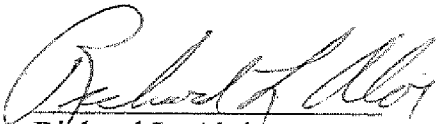
WHEREAS, Aero Pharmaceuticals, Inc. (Assignee"), a Florida corporation having an address at 3848 FAU Blvd., Suite 100, Boca Raton, Florida 33431, desires to acquire said Mark;

NOW, THEREFORE, in exchange for good and valuable consideration, receipt of which is hereby acknowledged, Assignor does hereby assign unto Assignee all right, title and interest in and to the Mark, the Application of the Mark in the United States Patent and Trademark Office as designated by the Application Serial Number of the Mark as set forth below, together with all of the goodwill of the business symbolized by the Mark.

The Mark and the federal trademark registration therefore hereby assigned are:

AEROKID

Serial Number: 78/136,211



Richard L. Aloï  
1935 S.W. 8<sup>th</sup> Street  
Boca Raton, Florida 33486

7/26/04  
Date