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RECORDATION FORM COVER SHEET
TRADEMARKS ONLY OPR/FINANCE

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

Submission Type

Conveyance Type

New

Resubmission (Non-Recordation)
Document ID #

Correction of PTO Error
Reel # Frame #

Corrective Document
Reel # Frame #

Assignment License

Security Agreement Nunc Pro Tunc Assignment
Effective Date
Month Day Year

Merger

Change of Name

Other

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name AMERICAN SAFETY AND HEALTH INSTITUTE, INC.

3/31/05

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization Florida

Receiving Party

Mark if additional names of receiving parties attached

Name AMERICAN SAFETY AND HEALTH INSTITUTE, INC.

Formerly

~~DEVELOPMENTAL~~ NATIONAL INSTRUCTORS RESOURCE CENTER, INC.

Composed of

Address (line 1) 4148 Louis Avenue

Address (line 2)

Address (line 3) Holiday

Florida

34691

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 Florida

FOR OFFICE USE ONLY

05/06/2005 GTOM11 00000018 2508510

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(40.00 OP)

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. 20503

REEL: 003157 FRAME: 0097

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)

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Registration Number(s)

<input type="text" value="2,508,510"/>	<input type="text"/>	<input type="text"/>
<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.

#

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.

David R. Ellis

David R. Ellis

5/3/05

Name of Person Signing

Signature

Date Signed

TRADEMARK ASSIGNMENT

WHEREAS AMERICAN SAFETY AND HEALTH INSTITUTE, INC., a Florida Not-For-Profit Corporation, ("Assignor") is the owner of various trademarks and service marks, including the Registered Trademark AMERICAN SAFETY AND HEALTH INSTITUTE and Design in Classes 9 and 16, registered in the United States Patent and Trademark Office, Registration No. 2,508,510 issued November 20, 2001 (collectively the "Marks"); and

WHEREAS AMERICAN SAFETY AND HEALTH INSTITUTE, INC., formerly NATIONAL INSTRUCTORS RESOURCE CENTER, INC., a Florida For-Profit corporation located at 4148 Louis Avenue, Holiday, Florida 34691 ("Assignee"), is desirous of acquiring said Marks and related good will;

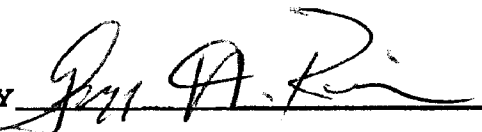
NOW THEREFORE, for good and valuable consideration, receipt of which is hereby acknowledged, Assignor does hereby assign, transfer and convey to Assignee all right, title and interest in and to the said Marks, together with the good will of the business connected with the use of and symbolized by the said Marks and the above-referenced registration.

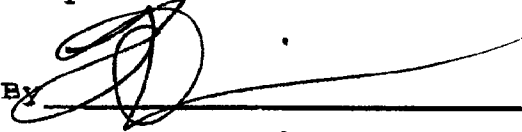
FURTHER, Assignor agrees to take all actions and cooperate as necessary to protect the Marks and further agrees to execute any documents that might be necessary to perfect Assignee's ownership and registration of the Marks.

The effective date of this Assignment is March 31, 2005.

AMERICAN SAFETY AND HEALTH INSTITUTE, INC., a Florida Not-For-Profit Corporation

Agreed and Accepted:
AMERICAN SAFETY AND HEALTH INSTITUTE, INC., formerly NATIONAL INSTRUCTORS RESOURCE CENTER, INC., a Florida For-Profit Corporation

By 
Title Chairman, BOD

By 
Title President