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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies): Personal Care Group Inc. 1 Paragon Drive Montvale, NJ 07645

2. Name and address of receiving party(ies) Name: Personal Care Group Inc. Internal Address: Street Address: 300 Nyala Farms Road City: Westport State: CT Zip: 06880

3. Nature of conveyance: [X] Other Change of Address Owner on Reel/Frame 1561/0370 Execution Date: 2/5/97

4. Application number(s) or registration number(s): A. Trademark Application No.(s) B. Trademark Registration No.(s) 0594339

5. Name and address of party to whom correspondence concerning document should be mailed: Ohlandt, Greeley, Ruggiero & Perle Name: Internal Address: 10th Floor Street Address: One Landmark Square City: Stamford State: CT Zip: 06901

6. Total number of applications and registrations involved: 1 7. Total fee (37 CFR 3.41): \$40.00 8. Deposit account number: 010467

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9. 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. Terrence J. McAllister, Esq. Signature Jan. 14, 2004 Date

Total number of pages including cover sheet, attachments, and document: 3 Mail documents to be recorded with required cover sheet information to: Commissioner of Patent & Trademarks, Box Assignments Washington, D.C. 20231

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