

FORM PTO-1594

RECORDATION FORM COVER SHEET

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

TRADEMARKS ONLY

Attorney Docket No. 9001-9386

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

<p>1. Name of conveying party(ies):</p> <p>ADVANCED NUTRITIONAL BIOSYSTEMS, Inc.</p> <p><input type="checkbox"/> Individual(s)      <input type="checkbox"/> Association  <input type="checkbox"/> General Partnership      <input type="checkbox"/> Other  <input type="checkbox"/> Limited Partnership  <input checked="" type="checkbox"/> Corporation - Florida</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies):</p> <p>Name: Dr. András SIKTER</p> <p>Street Address: H-1111 Budapest, Budafoki út 41/b, Hungary</p> <p><input checked="" type="checkbox"/> Individual(s) citizenship: Hungarian  <input type="checkbox"/> Association  <input type="checkbox"/> General Partnership  <input type="checkbox"/> Limited Partnership  <input type="checkbox"/> Corporation -  <input type="checkbox"/> Other</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Additional name(s) &amp; address(es) attached? <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No</p>
<p>3. Nature of conveyance:</p> <p><input checked="" type="checkbox"/> Assignment      <input type="checkbox"/> Merger  <input type="checkbox"/> Change of Name      <input type="checkbox"/> Other  <input type="checkbox"/> Security Agreement</p> <p>Execution Date: June 7, 2005</p>	

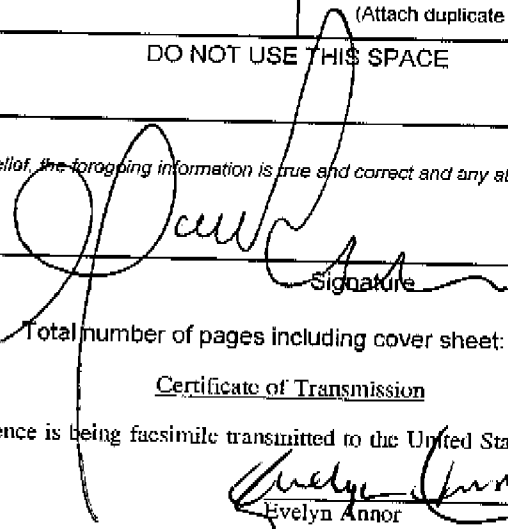
4. Application number(s) or registration (numbers):

<p>A. Trademark Application No(s).</p>	<p>B. Trademark Registration No(s).</p> <p>2,425,877</p>
<p>Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	

<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Mark Lebow YOUNG &amp; THOMPSON Second Floor 745 South 23rd Street Arlington, VA 22202</p>	<p>6. Total number of applications and registrations involved: 1</p> <p>7. Total fee (37 CFR 3.41).....\$ 40.00  <input type="checkbox"/> Enclosed  <input checked="" type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit Account No. 25-0120  (Attach duplicate copy of this page if paying by deposit account.)</p>
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DO NOT USE THIS SPACE

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.*

Mark Lebow            August 25, 2005  
Name of Person Signing      Signature      Date

Total number of pages including cover sheet: [ 2 ]

Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on August 24, 2005.

  
Evelyn Annor

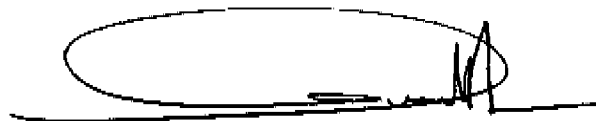
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ASSIGNMENT

Whereas ADVANCED NUTRITIONAL BIOSYSTEMS, INC., a Florida corporation with offices located at 8034 Sunport Drive, Suite 41, Orlando, Florida 32809, is the owner of the mark VITION shown in U.S. Trademark Registration No. 2425877 in the U.S. Patent and Trademark Office; and

Whereas Dr. András SIKTER, a individual of Hungarian citizenship with offices located at H-1111 Budapest, Budafoki út 41/b, Hungary, is desirous of acquiring said VITION mark and U.S. registration thereof;

Now, therefore, in consideration of \$10.00 and for other good and valuable consideration, receipt of which is hereby acknowledged, said ADVANCED NUTRITIONAL BIOSYSTEMS, INC. does hereby assign unto the said Dr. András SIKTER all rights, title and interest in and to the said mark and registration, together with the good will of the business symbolized by the mark.



\_\_\_\_\_  
Signature of ADVANCED NUTRITIONAL BIOSYSTEMS, INC.  
Officer

Sia Mack ALAVI President  
\_\_\_\_\_  
Printed Name and Title

6/7/2005  
\_\_\_\_\_  
Date



Ivelisse Colon  
My Commission DD341868  
Expires July 28, 2008

6/8/05 Ivelisse Colon