

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
BiaCare Corporation		12/27/2006	CORPORATION: MICHIGAN
RECEIVING PARTY DATA			
Name:	BiaForm Corporation		
Street Address:	140 W Washington Ave		
Internal Address:	Suite 400		
City:	Zeeland		
State/Country:	MICHIGAN		
Postal Code:	49464		
Entity Type:	CORPORATION: MICHIGAN		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Serial Number:	78898268	COMPREFIT	
CORRESPONDENCE DATA			
Fax Number:	(616)931-0055		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	6169311267		
Email:	keith@biacare.com		
Correspondent Name:	BiaCare Corporation		
Address Line 1:	140 W Washington Ave		
Address Line 4:	Zeeland, MICHIGAN 49464		
NAME OF SUBMITTER:	Keith A. Hoffman		
Signature:	/Keith A. Hoffman/		
Date:	12/27/2006		
Total Attachments: 0			

OP \$40.00 78898268

TRADEMARK

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