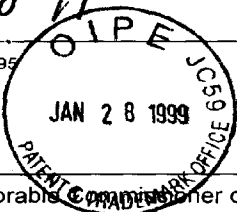


MAK 1-28-99

02-10-1999

FORM PTO-1595  
(Rev. 5-93)



REC



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U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

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

1. Names of conveying parties:

1) MIGUEL BARBOSA  
2) GRAHAM K. BILTER  
3) ROBERT KOVELMAN  
4)  
5)  
6)

Additional names of conveying parties attached?  Yes  No

2. Name and address of receiving party:

Name: SIGNAL PHARMACEUTICALS, INC.

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

Street Address: 5555 OBERLIN DRIVE

City: SAN DIEGO State CA

Zip: 92121

Additional names & addresses attached?  Yes  No

3. Nature of conveyance:

Assignment  Merger

Security Agreement  Change of Name

Other \_\_\_\_\_

Execution Dates:

1) JANUARY 19, 1999 4) \_\_\_\_\_  
2) JANUARY 19, 1999 5) \_\_\_\_\_  
3) JANUARY 19, 1999 6) \_\_\_\_\_

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

If this document is being filed together with a new application, the execution date of the application is \_\_\_\_\_.

A. Patent Application No(s).  
09/177,785

B. Patent No(s).

Additional numbers attached?  Yes  No

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

Name: SEED AND BERRY LLP

Internal Address: DAVID J. MAKI

6300 COLUMBIA CENTER

Street Address: 701 FIFTH AVENUE

City: SEATTLE State: WA ZIP: 98104-7092

6. Total number of applications and patents involved..... 1

7. Total Fee (37 CFR 3.41): ..... \$40

Enclosed

Authorized to be charged to deposit account

8. Deposit account number:  
19-1090

02/02/1999 AIRMAIL 00000092 09177785


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40.00 00

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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.

DAVID J. MAKI  1/25/99

Name of Person Signing Signature Date

Total number of pages including cover sheet, attachments, and document: 4

## ASSIGNMENT

WHEREAS, we, Miguel Barbosa, Graham K. Bilter, and Robert Kovelman (hereinafter referred to as ASSIGNORS), having post office addresses of 13763 Camino del Suelo, San Diego, California 92129, 5052 San Aquario Drive, San Diego, California 92109, and 5527 Beaumont Avenue, La Jolla, California 92037, respectively, are the joint inventors of an invention entitled "DUAL REPORTER SYSTEM AND METHODS OF USE THEREFOR," as described and claimed in the specification for which an application for United States letters patent was filed on October 22, 1998, and assigned Application No. 09/177,785.

WHEREAS, Signal Pharmaceuticals, Inc. (hereinafter referred to as ASSIGNEE), a corporation of the State of California having a place of business at 5555 Oberlin Drive, San Diego, California 92121, is desirous of acquiring the entire right, title and interest in and to the invention and in and to any letters patent that may be granted therefor in the United States and in any and all foreign countries;

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, ASSIGNORS hereby sell, assign and transfer unto said ASSIGNEE the entire right, title and interest in and to said invention, said application and any and all letters patent which may be granted for said invention in the United States of America and its territorial possessions and in any and all foreign countries, and in any and all divisions, reissues and continuations thereof, including the right to file foreign applications directly in the name of ASSIGNEE and to claim priority rights deriving from said United States application to which said foreign applications are entitled by virtue of international convention, treaty or otherwise, said invention, application and all letters patent on said invention to be held and enjoyed by ASSIGNEE and its successors and assigns as fully and entirely as the same would have been held and enjoyed by ASSIGNORS had this assignment, transfer and sale not been made. ASSIGNORS hereby authorize and request the Commissioner of Patents and Trademarks to issue all letters patent on said invention to ASSIGNEE. ASSIGNORS agree to execute all instruments and documents required for the making and prosecution of applications for United States and foreign letters patent on said

invention, for litigation regarding letters patent, or for the purpose of protecting title to said invention or letters patent therefor.

Date 1/19/99 1/9/99

Miguel Barbosa  
Miguel Barbosa

State of \_\_\_\_\_  
COUNTY OF SAN DIEGO

I certify person who appeared and acknowledged it the instrument.

On 1/19, 1999, before me MARTHA C GOMEZ,

Notary Public, personally appeared MIGUEL BARBOSA

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS by my hand and official seal.

Martha Gomez  
Signature



AAAAAA Inc. "Notaries Will Travel" Office ♦ (619) 233-6654 ♦ Cellular (619) 292-8310

My appointment expires \_\_\_\_\_

Date 1-19-99

Graham K. Bilter  
Graham K. Bilter

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ )

SS.

I certify person who appeared to and acknowledged it to the instrument.

STATE OF CALIFORNIA  
COUNTY OF SAN DIEGO  
On 1/19, 1999, before me MARTHA C GOMEZ,

Notary Public, personally appeared Graham K Bilter

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS by my hand and official seal.

Martha Gomez  
Signature



Reorder ♦ 619-235-6244

AAAAAA Inc. "Notaries Will Travel" Office ♦ (619) 233-6654 ♦ Cellular (619) 292-8310

1/19/99

*Robert Kovelman*

1/19/99

*Robert Kovelman*

Date \_\_\_\_\_

Robert Kovelman

State of \_\_\_\_\_ )

County of \_\_\_\_\_ )

ss.

I certify that I know or have satisfactory evidence that Robert Kovelman is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated \_\_\_\_\_

Signature of Notary Public \_\_\_\_\_

Printed Name \_\_\_\_\_

My appointment expires \_\_\_\_\_

C:\Winword\Atk\1300.doc (860098.424)

STATE OF CALIFORNIA

COUNTY OF SAN DIEGO

On 1-19, 1999, before me MARTHA C GOMEZ

Notary Public, personally appeared

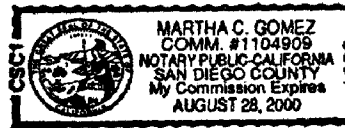
ROBERT KOVELMAN

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS by my hand and official seal.

*Martha C Gomez*

Signature



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