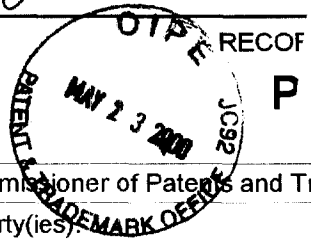


MRS. 5:2300

Docket No.: 20/149

FORM PTO-1595 (Modified)
(Rev. 6-93)
OMB No. 0651-0011 (exp. 4/94)
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U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

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

1. Name of conveying party(ies):
KMC International
Additional names(s) of conveying party(ies) Yes No

2. Name and address of receiving party(ies):
Name: **Innovative Medical Devices (UK) Ltd.**
Internal Address:
Greylands 4, Arleston Hill
Telford, TF1 2JY
Street Address: **Shropshire**
United Kingdom
City: _____ State: _____ ZIP: _____
Additional name(s) & address(es) attached? Yes No

3. Nature of conveyance:
 Assignment Merger
 Security Agreement Change of Name
 Other _____
Execution Date: **December 29, 1999**

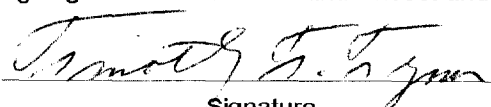
4. Application number(s) or registration numbers(s):
If this document is being filed together with a new application, the execution date of the application is: _____
A. Patent Application No.(s)
08/946,119 Assignment is by person to whom invention was previously assigned and this was recorded in the PTO on 03/12/1998 at Reel 9043 and Frame 0740
Additional numbers attached? Yes No

B. Patent No.(s)
05/25/2000 UKORDMA 00000043 08946119
02 FC:581 40.00 0P

5. Name and address of party to whom correspondence concerning document should be mailed:
Name: **Timothy T. Tyson**
Internal Address:
Freilich, Hornbaker & Rosen
Street Address: **Suite 1220**
10960 Wilshire Boulevard
City: **Los Angeles** State: **CA** ZIP: **90024**

6. Total number of applications and patents involved: **1**
7. Total fee (37 CFR 3.41):.....\$ **40.00**
 Enclosed - Any excess or insufficiency should be credited or debited to deposit account
 Authorized to be charged to deposit account
8. Deposit account number:
06-1985

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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.
Timothy T. Tyson  **May 23, 2000**
Name of Person Signing Signature Date
Total number of pages including cover sheet, attachments, and document: **4**

For U.S. and/or Foreign Rights
For U.S. Application or
 U.S. Provisional Application
For U.S. Patent
For PCT Application
By: Inventor(s) or Present Owner

ASSIGNMENT OF INVENTION

In consideration of the payment by ASSIGNEE to ASSIGNOR of the sum of One Dollar (\$1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,

ASSIGNOR:

Inventor(s) or person(s) or entity(ies) who own the invention

Casey Cho, President of Camda Corporation
dba KMC International, a California Corporation,
formerly KMC International, a sole proprietorship

(type or print name(s) of ASSIGNOR(S))

3435 Wilshire Boulevard, Suite 990
Address
Los Angeles, California 90010

United States

Nationality

(if assignment is by person or entity to whom invention was previously assigned and this was recorded in PTO, add the following)

Recorded on _____ Reel _____
Frame _____

hereby sells, assigns and transfers to

ASSIGNEE:

Innovative Medical Devices (UK) Ltd.
(type or print name(s) of ASSIGNEE(S))

Greylands 4, Arleston Hill

Address

Telford, TF12JY

United Kingdom

Nationality

and the successors, assigns and legal representatives of the ASSIGNEE

(complete one of the following)

the entire right, title and interest

an undivided _____ percent (_____ %) interest
for the United States and its territorial possessions

(check the following box, if foreign rights are also to be assigned)

and in all foreign countries, including all rights to claim priority,
in and to any and all improvements which are disclosed in the invention entitled:

A Skin Treatment Apparatus

Name of inventor(s) Casey Cho and Hur Jong Ki

(check and complete (a), (b), (c), (d), (e), (f), or (g))

and which is found in (37 C.F.R. § 3.21)

(a) U.S. patent application executed on even date herewith

(b) U.S. patent application executed on _____

(c) U.S. provisional application naming the above inventor(s) for the above-entitled invention.

Express mail label no.: _____

Mailed: _____

To comply with 37 C.F.R. § 3.21 for recordal of this assignment, I, an ASSIGNOR signing below, hereby authorize and request my attorney to insert below the filing date and application number when they become known.

(d) U.S. application no. 08 / 946,119
filed on October 7, 1997

(e) International application no. PCT/ _____ / _____

(f) U.S. patent no. _____ issued _____

A change of address to which correspondence is to be sent regarding patent maintenance fees is being sent separately.


(also check (g), if foreign application(s) is also being assigned)

(g) and any legal equivalent thereof in a foreign country, including the right to claim priority

and, in and to, all Letters Patent to be obtained for said invention by the above application or any continuation, division, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof.

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment.

(Assignment of Invention [16-3]—page 2 of 3)

non-privileged 

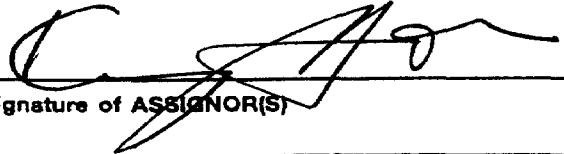
ASSIGNOR further covenants that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent and legal equivalents as may be known and accessible to ASSIGNOR and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said application, said invention and said Letters Patent and said equivalents thereof which may be necessary or desirable to carry out the purposes thereof.

 non-privileged.

IN WITNESS WHEREOF, I/We have hereunto set hand and seal this 29th day of December, 1999
Date of signing

WARNING: The date of signing must be the same as the date of execution of the application, if item (a) was checked above.

Date: _____
Date: _____
Date: _____
Date: _____



Signature of ASSIGNOR(S)

(if ASSIGNOR is a legal entity, complete the following information)

(type or print the name of the above person authorized to sign on behalf of ASSIGNOR)

Title

NOTE: No witnessing, notarization or legalization is necessary. If the assignment is notarized or legalized, then it will only be prima facie evidence of execution. 35 U.S.C. § 261. Use next page if notarization is desired.

Notarization or Legalization Page Added.

(Assignment of Invention [16-3]—page 3 of 3)