

04-19-2002

FORM PTO-1594 (Rev. 6-93)

OBM No. 0651-0011 (exp. 4/94)



JET

U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office

102060897

To the Honorable Commissioner of Patents and Trademarks:

attached original documents or copy thereof.

## 1. Name of conveying party(ies):

Benjamin Pelcman and Edward Roberts

04/15/02

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

## 2. Name and address of receiving party(ies):

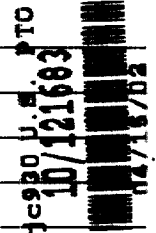
Name: Astra Pharma Inc.

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

Street Address: 1004 Middlegate Road

City/State/ZIP: Mississauga, Ontario L4Y 1M4

CANADA



## 3. Nature of conveyance:

- ☒ Assignment ☐ Merger  
☐ Security Agreement ☐ Change of Name  
☐ Other \_\_\_\_\_

Execution Date: December 17, 1997 and January 23, 1998

Additional name(s) & address(es) attached? ☐ Yes ☒ No

## 4. Application number(s) or patent 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)

B. Patent No.(s)

Divisional of 09/645,565 filed herewith

Additional numbers attached? ☐ Yes ☒ No

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

Name: Michael A. Sanzo

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

Street Address: Pillsbury Winthrop LLP  
1600 Tysons Boulevard

City/State/ZIP: McLean, VA 22102

## 6. Total number of applications and patents involved:

1

7. Total Fee (37 C.F.R. § 3.41) ..... \$ 40.00

- ☒ Enclosed  
☒ Authorized to be charged to deposit account

## 8. Deposit account number:

03-3975 - to be used only if fee is not enclosed

(Attach duplicate copy of this page if paying by deposit account)

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.*Michael A. Sanzo  
Name of Person SigningMichael A. Sanzo  
SignatureApril 15, 2002  
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 Patents & Trademarks, Box Assignments  
 Washington, D.C. 20231

FORM 6-03.W 25

04/17/2002 WABDEL1 00000030 10121683

03 FC:581

40.00 DP

PATENT  
 REEL: 012796 FRAME: 0020

**ASSIGNMENT TO ASTRA PHARMA INC.**

**Title:** Novel compounds with analgesic effect  
**Inventors:** Benjamin Pelcman and Edward Roberts  
**PCT Appl. No:** PCT/SE97/02051  
**Intn'l Filing Date:** 09 December 1997  
**Execution Date of Application:**

As a below-named inventor, I hereby declare that:

My post office address is as stated below under my signature and I am named as inventor of the inventions or discoveries (herein INVENTIONS) as described in the patent application (herein APPLICATION) identified above. In view of valuable consideration, receipt thereof is hereby acknowledged, I do hereby assign and transfer unto ASTRA PHARMA INC., a corporation of Canada having a place of business at 1004 Middlegate Road, MISSISSAUGA, Ontario L4Y 1M4, Canada, its successors and assigns, my entire interest in and the full and exclusive right to the INVENTIONS, the APPLICATION and all related applications (including all divisions, reissues, continuations, and extensions thereof) and all counterparts in other countries, and any and all Letters Patent (and certificates of invention or similar certificates) (herein PATENTS) which may be granted based upon the INVENTIONS or the APPLICATION or related applications or counterparts in other countries; said transfer and assignment being applicable throughout the world. I hereby authorize and request officials of patent offices in any and all countries of the world to issue any and all of the PATENTS, when granted, to ASTRA PHARMA INC., its successors and assigns, as the assignee of my entire right, title, and interest in and to the same. I agree that I will communicate to ASTRA PHARMA INC., or its representatives, any facts known to me respecting the invention; testify in any legal proceedings; sign all lawful papers; execute all divisional, continuation, substitution, renewal, and reissue applications; execute all necessary assignment papers to cause any and all of the PATENTS to be issued to ASTRA PHARMA INC.; make all rightful oaths; and generally do everything possible to aid ASTRA PHARMA INC., its successors and assigns, to obtain and enforce proper protection for the INVENTION in any and all countries throughout the world.

FULL NAME OF FIRST INVENTOR: Benjamin Pelcman

Signature of Inventor: Benjamin Pelcman

Address: Döbelnsgatan 93, S-113 52 Stockholm, Sweden

Date: 17 December 1997

FULL NAME OF SECOND/JOINT INVENTOR: Edward Roberts

Signature of Inventor: Edward Roberts

Address: 2541 Chestnut Circle, St. Lazare de Vaudreuil, Québec, Canada J7T 2A1

Date: 23<sup>rd</sup> January 1998