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To the Assistant Commissioner of Patents
Please record the attached original documents or copy thereof

1. Name of conveying party(ies)

Piero DEL SOLDATO
Francesca BENEDELLI
Patrizia ANTOGNAZZA

Additional name(s) of conveying party(ies) attached?

Yes No

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

Name: NICOX S.A.

Address: Sophia Antipolis
1900 rue des Cretes
F-06560 Valbonne (FR)

Additional name(s) & address(es) attached?

Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

Execution Date: June 20, 2002

10/181424

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: June 20, 2002

A. Patent Application No.(s)

B. Patent No.(s)

Additional numbers attached? Yes No

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

Name: Arent Fox Kintner Plotkin & Kahn PLLC
Street Address: 1050 Connecticut Avenue, N.W., Suite 400
Washington, D.C. 20036-5339

6. Total number of applications and patents involved:
One

7. Total fee (37 CFR 3.41)..... \$ 40.00

- Included in attached check.
- Any additional fees are authorized to be charged to deposit account

8. Deposit account number: 01-2300
(Attach duplicate copy of this page if paying by deposit account)

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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.

Richard J. Berman

Name of Person Signing
Reg. No. 39,107

Signature

July 24, 2002

Date

Total number of pages including cover sheet, attachments, and document: 2

Docket No. _____

U.S. ASSIGNMENT

IN CONSIDERATION of the sum of One Dollar (\$1.00), and of other good and valuable consideration paid to the undersigned inventor(s) (hereinafter ASSIGNOR) by

[Insert
ASSIGNEE's
Name(s)
Address(es)]

NICOX S.A.

Sophia Antipolis, 1900 rue des Crêtes, F-06560 Valbonne (FR)

(hereinafter ASSIGNEE), the receipt of which is hereby acknowledged, the undersigned ASSIGNOR hereby sells, assigns and transfers to ASSIGNEE the entire and exclusive right, title and interest to the invention entitled

[Title of
Invention]

"NITRATE SALTS OF ANTIMICROBIAL AGENTS"

for which application for Letters Patent of the United States was executed on even date herewith unless otherwise indicated below:

[*If the assignment
is being filed
after the filing of the
application, this
section must be
completed]

*filed on _____, Serial No. _____

(Arent Fox Kintner Plotkin & Kahn is hereby authorized to insert the series code, serial number and/or filing date hereon, when known)

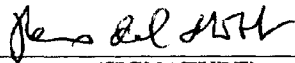


and all Letters Patent of the United States to be obtained therefor on said application or any continuation, division, renewal, substitute, reissue or reexamination thereof for the full term or terms for which the same may be granted.

The ASSIGNOR agrees to execute all papers necessary in connection with application and any continuing, divisional, reissue or reexamination applications thereof and also to execute separate assignments in connection with such applications as the ASSIGNEE may deem necessary or expedient.

The ASSIGNOR agrees to execute all papers necessary in connection with any interference, litigation, or other legal proceeding which may be declared concerning this application or any continuation, division, reissue or reexamination thereof or Letters Patent or reissue patent issued thereon and to cooperate with the ASSIGNEE in every way possible in obtaining and producing evidence and proceeding with such interference, litigation, or other legal proceeding.

IN WITNESS WHEREOF, the undersigned inventor(s) has (have) affixed his/her/their signature(s).

[Signature(s)
of Assignor(s)]

	<u>Piero DEL SOLDATO</u>	<u>June 20, 2002</u>
(SIGNATURE)	(TYPE NAME)	(DATE)
	<u>Francesca BENEDINI</u>	<u>June 20, 2002</u>
(SIGNATURE)	(TYPE NAME)	(DATE)
	<u>Patrizia ANTOGNAZZA</u>	<u>June 20, 2002</u>
(SIGNATURE)	(TYPE NAME)	(DATE)
_____	_____	_____
(SIGNATURE)	(TYPE NAME)	(DATE)
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NO LEGALIZATION REQUIRED