05-24-2004 U.S. Department of Commerce FORM PTO-1619A Patent and Trademark Office PATENT OMB 0651-0027 21 7 15 102751380 RECORDATION FORM COVER SHEET **PATENTS ONLY** TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies). Submission Type Conveyance Type | X | X | Assignment **Security Agreement** New Resubmission (Non-Recordation) License Change of Name Document ID# Correction of PTO Error Other Merger Reel # Frame # U.S. Government **Corrective Document** (For Use ONLY by U.S. Government Agencies) Reel # Frame # Departmental File Secret File Conveying Party(ies) Mark if additional names of conveying parties attached **Execution Date** Month Day \_Year Name (line 1) ProHealth Medical Technologies Corp. of Ohio 05 13 2004 Name (line 2) Execution Date Month Day Year Second Party Name (line 1) Name (line 2) **Receiving Party** Mark if additional names of receiving parties attached If document to be recorded Perfect Smile Corporation Name (line 1) is an assignment and the receiving party is not domiciled in the United Name (line 2) States, an appointment of a domestic Address (line 1) | 29313 Clemens Road representative is attached. (Designation must be a separate document from Address (line 2) Unit 2E Assignment.) OH Address (line 3) Westlake 44145 State/Country **Domestic Representative Name and Address** Enter for the first Receiving Party only. Name Address (line 1) Address (line 2) Address (line 3) Address (line 4) FOR OFFICE USE ONLY Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-8027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS. Mail documents to be recorded with required cover sheet(s) information to: Commissioner of Patents and Trademarks, Box Assignments , Washington, D.C. 20231 05/21/2004 MGETACHE 00000020 5165424

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**PATENT** 

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FORM PTC Expires 06/30/99 OMB 0651-0027	)-1619B	Page 2	U.S. Department of Commerce Patent and Trademark Office PATENT
Correspondent Name and Address  Area Code and Telephone Number (614) 436-0600			
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If this document is being filed together with a <u>new</u> Patent Application, enter the date the patent application was <u>Month Day Year</u> signed by the first named executing inventor.			
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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. Charges to deposit account are authorized, as			
indicate	ed herein.	\ Acas A \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,
Jerry K. Muell	er, Jr.	XIIVhule	May 17, 2004
Name	of Person Signing	Signature	Date

PATENT REEL: 015341 FRAME: 0313

Attorney Docket: PSC 2-005

## **ASSIGNMENT**

WHEREAS, ProHealth Medical Technologies Corp. of Ohio, having an address at 29263 Clemens Road, Westlake, OH 44145 (the "Assignor"), is the sole and exclusive owner of the invention identified as:

U.S. Pat. No. 5,165,424, issued on November 24, 1992, for "Method and System for Whitening Teeth";

WHEREAS, Perfect Smile Corporation, a Delaware corporation, having its principal office at 29313 Clemens Road, Unit 2E, Westlake, OH 44145, (the "Assignee") is desirous of acquiring all of the right, title, and interest in and to the aforesaid invention and patent listed above.

NOW, THEREFORE, To All Whom It May concern, be it known that, for and in consideration of the sum of Ten Dollars (\$10.00), and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Assignor has sold, assigned. transferred, and by these presents does assign, and transfer, unto said Assignee, its entire right, title and interest in and to the invention shown, described, and claimed in the aforesaid United States Patent No. 5,165,424; and in and to any extensions, reissues, or renewals thereof.

And the Assignor further covenants and agrees that it will execute such additional and further assurance of title as may be necessary or proper to fully convey the interest herein sought to be conveyed; that the Assignor will execute such application papers as may be desired by the said Assignee for the filing of any reissues of United States Patent No. 5,165,424.

And Assignor further has sold. assigned, and transferred and by these presents does sell, assign, and transfer unto said Assignee its entire right, title and interest in all rights and choses in action on account of all past, present, and future unauthorized use of the inventions shown. described, and claimed in United States Patent No. 5,165,424 and for infringement of United States Patent No. 5.165.424. Such right, title and interest shall include, but is not limited to, the right to collect and retain any and all damages, including attorneys fees, based on said rights and choses in action.

IN TESTIMONY WHEREOF, Robert O. Wolf, President of ProHealth Medical Technologies Corp. has hereunto set his hand at Cleveland, Ohio this 13 day of May 2004.

PROHEALTH MEDICAL TECHNOLOGIES CORP.

Robert O. Wolf, President

STATE OF OHIO

, ) ss.

**COUNTY OF CUYAHOGA** 

Sworn to and subscribed before this \_\_\_\_\_ day of May 2004.

PATENT

REEL: 015341 FRAME: 0314

OWNER

**RECORDED: 05/20/2004** 

Assignment Page 2 of 2

PURCHASER.

Notary Public

LINDA K. HIMMELEIN
Notary Public, State of Ohio
Recorded in Lake County
My Commission Expires May 13, 2004

PATENT REEL: 015341 FRAME: 0315