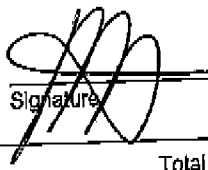
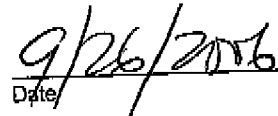


**RECORDATION FORM COVER SHEET  
PATENTS ONLY**

Commissioner for Patents: Please record the attached original document(s) or copy(ies).	
1. Name of conveying party(ies): <b>Dimitri T. Azar and Jin-Hong Chang</b> Additional name(s) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies): <b>Massachusetts Eye &amp; Ear Infirmary 243 Charles Street Boston, MA 02114</b>  Additional names/addresses attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other: Execution Date: <b>07/28/06; 07/26/06</b>	
4. Application number(s) or patent number(s): If this document is being filed with a new application, the execution date of the application is: A. Patent Application No(s): <b>11/346,490</b> B. Patent No(s):  Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Name/address of party to whom correspondence concerning document should be mailed: <b>Fish &amp; Richardson P.C. 225 Franklin Street Boston, MA 02110</b>	6. Total number of applications/patents involved: <b>1</b> 7. Total fee (37 CFR §3.41): <b>\$40</b> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to charge Deposit Account. 8. Deposit Account No.: <b>06-1050</b> Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.
<b>DO NOT USE THIS SPACE</b>	
9. Statement and Signature: <i>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.</i>  Janice L. Kugler Reg. No. 50,429 Name of Person Signing   Signature   Date  Total number of pages including coversheet, attachments and document: <b>4</b>	

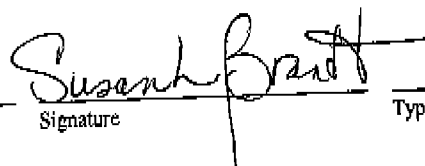
21434068.doc

**CERTIFICATE OF TRANSMISSION BY FACSIMILE**

I hereby certify that this correspondence is being transmitted by facsimile to the Patent and Trademark Office on the date indicated below.

September 26, 2006  
Date of Transmission

Signature

Susan L. Brandt  
Typed Name of Person Signing Certificate**PATENT**

700288925

REEL: 018310 FRAME: 0184

CH \$40.00 061050 11346490

### ASSIGNMENT


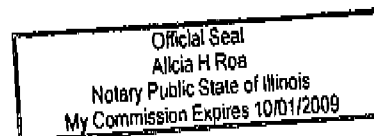
For valuable consideration, we, Dimitri T. Azar, of Chicago, IL and Jin-Hong Chang, of Clarendon Hills, IL, hereby assign to MASSACHUSETTS EYE & EAR INFIRMARY, a corporation of Massachusetts, having a place of business at 243 Charles Street, Boston, MA 02114, and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are subject of an application for United States Patent signed by us, entitled NEOSTATINS, filed February 1, 2006, and assigned U.S. Serial Number 11/346,490, this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in our name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and we agree for ourselves and our respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

Attorney Docket No: 00633-040001

DATE: 7/28/06  
DIMITRI T. AZARSTATE OF Illinois )  
COUNTY OF Cook ) SS.

On July 28, 2006, before me, the undersigned, a notary public for the State of Illinois, there personally appeared DIMITRI T. AZAR personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which she acted, executed this Assignment.

WITNESS my hand and official seal.

  
Notary Public

Attorney Docket No: 00633-040001

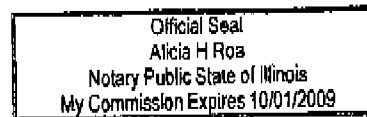
DATE: 7/26/2006 Jin-Hong Chang  
JIN-HONG CHANG

STATE OF Illinois )  
COUNTY OF Cook ) SS.

On July 26, 2006, before me, the undersigned, a notary public for the State of Illinois, there personally appeared JIN-HONG CHANG personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his/her authorized capacity and that by his/her signature on this Assignment, the person or the entity upon behalf of which he/she acted, executed this Assignment.

WITNESS my hand and official seal.

Alicia H. Roa  
Notary Public



21321230.doc