

11-08-2002



REGISTRATION FORM COVER SHEET
TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office

102276812

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

1. Name of conveying party(ies):

Pharmacia & Upjohn Company

11-4-02

- Individual(s) Association
- General Partnership Limited Partnership
- Corporations-State (Delaware)
- Other _____

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

3. Nature of conveyance:

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

Execution Date: _____

2. Name and address of receiving party(ies)

Name: Bristol-Myers Squibb Company

Internal

Address: _____

Street Address: 345 Park Avenue

City: New York State: New York Zip: 10154

- Individual(s) citizenship _____
- Association _____
- General Partnership _____
- Limited Partnership _____
- Corporation-State Delaware
- Other _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)
Additional name(s) & address(es) attached? Yes No

4. Application number(s) or registration number(s):

A. Trademark Application No.(s)

75/018,448

B. Trade Mark Registration No.(s)

Additional number(s) attached Yes No

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

Name: Nadine P. Flynn, Esq.

Internal Address: Bristol-Myers Squibb Company

Street Address: 345 Park Avenue

City: New York State: New York Zip: 10154

6. Total number of applications and registrations involved: _____

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

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

13 2505

(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.

Oswaldo F. Lecuona

Name of Person Signing

[Signature]

Signature

October 28, 2002

Date

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Total number of pages including cover sheet, attachments, and document: 3

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patent & Trademarks, Box Assignments
Washington, D.C. 20231

TRADEMARK
REEL: 002613 FRAME: 0435

TRADEMARK ASSIGNMENT

This assignment is made between Pharmacia & Upjohn Company ("Assignor"), a Delaware corporation, with its principal place of business at 100 Route 206 North, Peapack, New Jersey 07977 and Bristol-Myers Squibb Company ("Assignee"), a Delaware corporation, having a principal place of business at 345 Park Avenue, New York, New York 10154.

WHEREAS, Assignor owns a United States trademark application to register the mark ELSENA in the United States Patent and Trademark Office, U.S. Application Serial No. 75/018,448, filed on April 5, 2000.

WHEREAS, Assignee is desirous of acquiring all rights, title and interest in Assignor's ELSENA mark and trademark application.

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Assignor does hereby assign and transfer to the Assignee, as the successor of Assignor's business pertaining to the mark ELSENA, all Assignor's right, title and interest in and to the ELSENA mark in the United States, together with the goodwill of the business pertaining to the mark, and including U.S. application Serial No. 75/018,448.

IN TESTIMONY WHEREOF, Assignor represents that the person executing this assignment has the authority to execute it and has executed this document on the date indicated.

Signed at Peapack, NJ, this 3rd day of May, 2002.

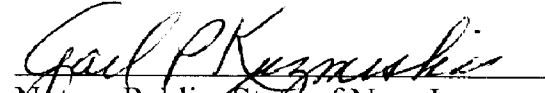
Pharmacia & Upjohn Company

By: Cynthia B. Summerfield
Cynthia B. Summerfield
Associate General Counsel

STATE OF:

COUNTY OF:

Before me, the undersigned authority, on this 3rd day of May, 2002, personally appeared Cynthia B. Summerfield known to me to be the person whose name is subscribed to the foregoing instruments and acknowledged to me that she is authorized to execute the same on behalf of the identified corporation and that she executed the same on behalf of the corporation for the purposes and consideration therein expressed.


Notary Public, State of New Jersey

Name Printed: GAIL P. KUZMISKAS

My Commission Expires: _____

GAIL P. KUZMISKAS
NOTARY PUBLIC OF NEW JERSEY
MY COMMISSION EXPIRES
FEBRUARY 21, 2006