

Form PTO-1594 (Rev 10/02) OMB No 0651-0027 (exp 6/30/2005) Tab settings

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

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

1. Name of conveying party(ies) OleoMed America, Inc.

- Individual(s), Association, General Partnership, Limited Partnership, Corporation-State, 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: 10/21/2004

2. Name and address of receiving party(ies)

Name OLI, LLC Internal Address: Street Address: 3075 NW 107th Avenue City: Miami State: FL Zip: 33172

- Individual(s) citizenship, Association, General Partnership, Limited Partnership, Corporation-State, Other limited liability company

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) 78/420,929; 78/420,976; 78/420,875; 78/394,166

B. Trademark Registration No (s)

Additional number(s) attached Yes No

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

Name Mark D Passler Internal Address Akerman Senterfitt

Street Address 222 Lakeview Avenue, 4th Floor

City West Palm Beach State FL Zip 33401

6. Total number of applications and registrations involved.

4

7. Total fee (37 CFR 3.41) \$ 115.00

- Enclosed, Authorized to be charged to deposit account

8. Deposit account number:

500951

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9. Signature.

Mark D Passler Name of Person Signing

Signature

11-30-04 Date

5

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

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

(Print, Type or Stamp Commissioned Name of Notary Public)

OLI, LLC

By: MTOM

Name: MIKE TOTIAS

Title: _____

STATE OF FLORIDA)
) ss:
COUNTY OF MIAMI-DADE)

The foregoing instrument was sworn to and subscribed before me this 5 day of NOVEMBER, 2004, by MIKE TOTIAS of OLI, LLC, on behalf of the company. He/she is personally known to me or has produced _____ (type of identification) as identification.

[Signature]
NOTARY PUBLIC STATE OF FLORIDA

NANCY ORTIZ
(Print, Type or Stamp Commissioned Name of Notary Public)

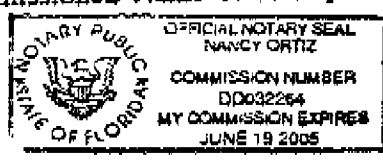


EXHIBIT A

U.S. Trademark Applications

Application No.	Application Date	Registration Date	Mark
78/420,929	May 18, 2004		Reverse Time Emit Beauty
78/420,976	May 18, 2004		Reverse Time Emit Beauty and design
78/420,875	May 18, 2004		OLI
78/394,166	March 31, 2004		OLI and design

Foreign Trademark Applications

Country	Application No.	Application Date	Registration Date	Mark
European Community	3,872,553	June 4, 2004		OLI
European Community	3,872,561	June 4, 2004		OLI and design