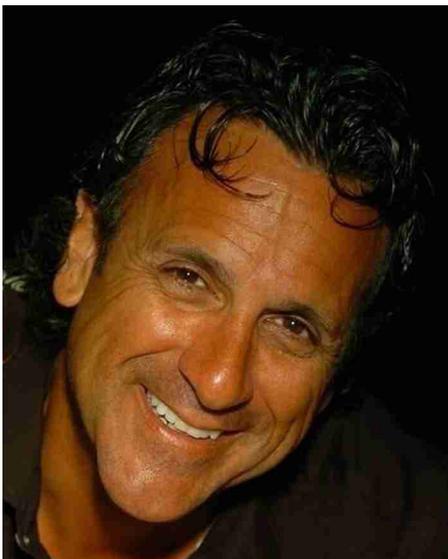


Entering into an Agreement with Intrexon, positions BioLife Cell Bank, Inc. to go into the Spinal Muscular Atrophy (SMA) Research Arena with a Focus on Using the Patients' Own Adipose-Derived Stem Cells in Regenerative Therapies

**Healthcare
Regenerative Medicine
(Private)**

**BioLife Cell Bank, Inc.
11970 N. Central Expressway
Suite 280
Dallas, TX 75243
Phone: 972-331-1905
www.biolicellbank.com**



**John A. Carbona
Chief Executive Officer**

BIO:

- Founder and Managing Partner, Carbona Capital, LLC
- Independent Director, Compass Bank Young Executive Board
- Independent Director, American Heart Association
- Independent Director, Humanetics II
- Independent Director, Waller Creek Communications
- Independent Director, Miles for Monte

John Carbona is the Managing Partner of Carbona Capital, LLC (CCLLC), a Florida-based corporation founded in 1998 focused on “angel stage” investments in privately owned entities. For more than 14 years, the mission as an early-stage venture capital firm has been to identify, invest in, mentor and develop companies that will redefine success in their own niche. CCLLC is dedicated to supporting companies in order to increase sales and bottom-line profit. Since 1998, CCLLC has invested in a wide variety of companies and real estate projects, targeting no specific geographic area or market segment.

Mr. Carbona began his career as a sales executive with Mead Johnson, a division of Bristol Myers, working at Yale New Haven Hospital and later Stryker Corporation. His aptitude and merit in the medical industry propelled him from being the only sales representative of a struggling two-product company to President and CEO of an \$80 million dollar international company.

In 1984, Mr. Carbona joined Cardio Systems as a sales representative and after only 8 years had added 20 products to the line, created a sales and service force of 500, and had opened 71 domestic offices and European offices in Germany, England, Ireland and the United Kingdom. He increased annual revenues from \$2 million to \$80 million.

Known for his innovative marketing and sales approaches, Mr. Carbona originated the use of cross-marketing alliances, shared revenue agreements and direct advertising within the

health care industry—now commonplace practices.

Mr. Carbona held or co-held 6 patents and 30 trademarks in his name, which were sold in an industry roll-up sponsored by Bruckmann, Rosser, Sherrill & Co in 1998.

A native of Long Beach, New York, Mr. Carbona enjoys professional offshore powerboat racing. In 1991, he was inducted into the American Powerboat Association Hall of Fame for winning the United States title.

Company Profile:

As part of their core business, BioLife Cell Bank, Inc. offers individuals a way to safely store their own adipose (fat) tissue and/or their own adipose-derived stem and regenerative cells—giving patients and physicians easy, multi-use access to cells and tissue for future cosmetic, reconstructive and regenerative therapies. Tissue is extracted via liposuction and sent to BioLife in a collection kit (validated to E.T.L. standards). Tissue is processed using proprietary technology and Cytori Therapeutics' (NASDAQ: CYTX) products. Tissue is cryogenically preserved, and may be stored indefinitely. BioLife is registered with the FDA as a processing bank and complies with FDA regulations and guidance including current Good Tissue Practice (cGTP). BioLife is based in Dallas, Texas at Forest Park Medical Center. For more information: www.biolicellbank.com.

**Interview conducted by:
Lynn Fosse, Senior Editor**

CEOCFO: Mr. Carbona, what attracted you to BioLife Cell Bank?

Mr. Carbona: I was first introduced to BioLife through a long-standing relationship with one of the founders, John D. Harkey Jr. We have made a variety of private investments together over the past fifteen years. John asked me if I would be interested in joining the team. After conducting a short due diligence on BioLife, the products and services they were offering, and the opportunities that they afforded, I decided to come out of retirement and accept the position of BioLife CEO.

CEOCFO: What is the vision for the company and what is going on day to day?

Mr. Carbona: BioLife is currently an adipose tissue, and adipose stem cell (ADSC) cryogenic storage and processing facility based in Dallas, Texas. Our core business is working with plastic surgeons and dermatologists throughout the United States and having them educate patients that there is an opportunity to do something with their fat (removed by liposuction) rather than throw it away. Patients may want to store/use their own adipose tissue for cosmetic or reconstructive procedures.

Another possibility is storing their tissue for regenerative purposes—to use the stem cells that reside within the tissue for future treatments. Now, women and men are using artificial fillers to “plump up” and look a little bit younger and healthier. However, those facial fillers are somewhat toxic and temporary. By using your own natural adipose tissue, the fat will vascularize which means it will receive blood flow. After a few treatments of your own fat injections, you would never have to have another treatment because it is living tissue and permanent. Therefore, there are some benefits to using this tissue that was going to go in the trash. Currently, we have one hundred and fifty physicians around the United States that send us fat tissue. The samples come into Dallas where we have a fully-functioning cGTP-FDA certified laboratory. The laboratory processes, cleans, cryogenically freezes and stores the fat or stem cells (from the fat) for future use.

CEOCFO: Is storing fat unique to BioLife?

Mr. Carbona: Freezing or cryogenically preserving is not a new phenomenon. The ability to cryogenically preserve something is probably 25 years old. The technology we’re using is similar to what has been done for years with sperm and eggs for invitro fertilization (IVF). As far as the storage of adipose tissue, we were the first bank in Texas and probably one of the first banks in the United States to do this. We have been involved in the stem cell research side of this the science for a few years now, and we would like to have a larger installed base of clients in the future. Therefore, we are going to be expanding our offerings to not only store adipose tissue but also umbilical cord blood and tissue, amniotic fluid, and possibly even the CVS (chorionic villus sampling), which is part of the placenta discharged after childbirth. Recent studies have discovered that

I know the partnership between BioLife and Intrexon is going to be very powerful as we move forward. Our objective is laser-focused on helping treat patients with SMA.

- John A. Carbona

chorionic villi can be a rich source of fetal stem cells and multipotent mesenchymal stem cells.

CEOCFO: How do you work with your network of physicians; what is the incentive for them and how do you encourage interest?

Mr. Carbona: It is a very simple and logical decision for us to convey our services to physicians. Right now physicians are giving multiple treatments of synthetic facial fillers which last about six months. The results are immediate which is very nice. More is involved in our process, but it offers lasting and frequently permanent results. We are taking waste from a liposuction procedure and we are cleaning and storing living tissue. The doctor will retrieve it from us and may perform a minimally-invasive procedure where he re-injects/grafts this living tissue back into the face, neck, hands or buttocks. He also may perform more impactful procedures like breast augmentations or reconstructions. We’re finding a trend is for can-

cer patients who have had double mastectomies to not want to put anything artificial into their bodies. So putting their own fat, maybe from their thighs or abdomen, back into their bodies to reconstruct their figures is very popular now. The doctors see that there is a lot of logic to this, and that it is safe and natural for the patient. Even though there is a cost, over the course of three or four years of treatment with synthetic fillers, we can demonstrate that grafting your own fat back into your body is less expensive.

CEOCFO: Do you see the possibility of reaching out to the public?

Mr. Carbona: That is a paradigm shift from the way old school medical companies work. It has always been my philosophy to inform the doctors and then allow the doctors to educate their patients as to the efficacy of the product. We have always felt that it is the doctors’ choice to introduce this to their patients. However, we see now that patients are becoming increasingly more intelligent and proactive through internet research, blogs and advertising. Therefore, people are contacting us directly and asking questions, very good questions, and then we steer them to physicians that are either in our network or physicians that have expressed an interest in joining our network. Maybe in the future, I could see going direct to the public through advertising in magazines or television, but right now we still utilize the selling process where we go to the physicians to introduce them to BioLife. Our brochures are displayed in physician offices and that is how we get our point across to the consumer.

CEOCFO: I would imagine that since people tend to have repeated procedures, it would be easy to understand the benefits of your program?

Mr. Carbona: BioLife began because one of our founders, Dr. David Genevov, who is a world famous craniofacial surgeon, was using fat to build up tissue in the faces of children he was treating. He has a large clientele of cleft palate patients and he needed, for lack of a better word, the “clay” to recreate these gaps that existed in the

voids of these children's faces. He was in need of this type of technology and that is how he started BioLife. From there, he realized that after a liposuction, he would have enough inventory to maybe treat the patient four or five subsequent times depending on the procedure wanted or needed. We have a physician in Florida who actually did one or two liposuctions harvesting somewhere in the neighborhood of 3000 ccs of fat from a patient. Then he did a double breast augmentation for the woman with unbelievable results. Everybody was very pleased with the outcome, especially the woman because she had her own natural tissue grafted back into her body rather than having to worry about synthetics.

CEO CFO: Are there challenges in storing the fat?

Mr. Carbona: No, the science of storing and freezing fat is fairly simple. It has been tested over time and as long as we follow our established protocol, it really is not that difficult. We clean the fat of blood, lipoaspirate and oils using a **PUREGRAFT™** bag which is a double-layered membrane bag. We use a very specific methodology established by Cytori Therapeutics. After that, we inject a cryopreservative into the fat and then we store the fat in bags for large volume or we will put it into small vials—all which is done at the doctor's direction after interviewing the patient. For example, if the patient has nasal labial folds that the doctor and patient feel need to be addressed in the future, we will put the fat in vials and then the doctor will retrieve two or three vials and he will inject those vials right into the area to plump it up. If the patient is a cancer

patient who has had a double mastectomy, we will store that fat in large volume bags because a much larger volume will be needed for breast reconstruction. We must follow this process because currently you cannot refreeze the tissue—once thawed it must be used immediately or discarded.

CEO CFO: How do you transfer the fat?

Mr. Carbona: From the doctor's operating rooms, it is put into syringes. The syringes are put into specially-sealed pouches, which go into one of our retrieval kits (called a C.A.R.E. Kit). Then, they are iced down and sent via FedEx, arriving within 24 hours to our facility. (Our research shows that viability of the tissue remains intact for about 72 hours before cryopreservation.) Immediately upon arrival in Dallas, it goes directly into the laboratory, is inserted into the **PUREGRAFT™** bag, and the cleaning begins.

CEO CFO: What is the financial picture like for BioLife?

Mr. Carbona: Business is good. Recently we signed an exclusive collaborative agreement with Intrexon, a company based in Virginia. We are going to be entering into the spinal muscular atrophy (SMA) research arena. An inherited, incurable disease that afflicts about one in 6000 births, SMA is the number one genetic killer of young children. It is a dreaded disease and we are going to be looking at treating and curing this disease. Currently, there are some very skilled and brilliant researchers in the field, and it is my hope to work with them.

CEO CFO: Is BioLife Cell Bank looking for funding for growth or are you fairly well set for the moment?

Mr. Carbona: At the moment, we are a privately held company that is well-funded by individuals and a venture capital fund. Each one of these individuals is a savvy investor who felt that this was a wonderful opportunity to invest in a company that had a very nice footprint with its core business and had some great growth potential. As I mentioned before, we are going to be expanding our core business and are going to be getting into the research and treatment of SMA. Our partnership with Intrexon brings us a whole host of intellectual property that we did not have previously. (Intrexon is a privately held company with an enormous array of patents and intellectual property.) I know the partnership between BioLife and Intrexon is going to be very powerful as we move forward. Our objective is laser-focused on helping treat patients with SMA.

CEO CFO: Why should investors pay attention to BioLife Cell Bank today?

Mr. Carbona: BioLife is in an amazing growth mode. We are adding staff and our footprint is increasing along with our breadth of services. Investors should pay attention to BioLife for two reasons: we offer services that they may personally require, and the possibility of a public offering is not out of the question. With BioLife and Intrexon, they could make an early-stage investment in a company that is growing.



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