

Clinical Trials Update Continue to Demonstrate Successful Results of the “Randomized, Prospective, Multi-Center Trial” for the MedClose™ VCS

Sarasota, Fla., September 4, 2007 – CPC of America, Inc. (OTCBB: CPCF.OB) reports that its subsidiary, Med Enclosure, LLC, continues to report successful results with no adverse affects in both diagnostic and interventional clinical patients of the “Randomized, Prospective, Multi-Center Trial of the MedClose™ VCS” with a strong and diverse investigator base performing clinical trials. Comments continue from clinical investigators, heart catheterization laboratory technicians and nurses, recovery nurses, observing physicians, cardiology department heads, hospital administrators and patients have been positive and encouraging. Continuing data and results suggests that MedClose™ VCS may eliminate the need to wait or significantly reduce the holding period in recovery before pulling the sheath following interventional cases. If this trend continues as the study progresses, it suggests that MedClose™ VCS could represent an important enhancement to the gold standard of manual compression.

As reported in January 2007 and we continue to report and verify those early results which continue to suggest differences in the time-to-hemostasis between diagnostic and interventional cases, with average times of 4.6 minutes and 15.3 minutes, respectively, which is consistent with expectations. The closing actually occurs within 30 seconds or less of beginning to close utilizing MedClose™ VCS following the femoral arterial activities and the MedClose™ VCS is removed thereafter with finger compression for diagnostic and interventional cases. When MedClose VCS was used to augment compression, introducer sheaths were pulled immediately after the procedure, even when activated clotting time (ACT) >400 seconds, i.e. within minutes of discontinuing Bivalirudin. Investigators and support staff continue to comment positively regarding the ease of use by a single operator, suggesting hemostasis times in the presence of high levels of anticoagulation, and patient comfort associated with immediate sheath removal for which patients have made positive comments. The trend toward rapid sheath removal, especially following interventional procedures, suggests that MedClose VCS may represent a major enhancement to the existing gold standard of manual compression, and post-procedural care.

The “Randomized, Prospective, Multi-Center Trial of the MedClose™ VCS” device determined by both a US Independent Review Board and a Canadian Independent Review Board with subsequent approval by the Canadian Health, Health Products and Food Branch, Therapeutic Products Division for Protocol #CL-7000 Rev E is intended to seal femoral arterial puncture sites and reduce time to hemostasis and ambulation in patients who have undergone interventional and diagnostic catheterization procedures. The Clinical Trials started with CL7000 Protocol Rev D and then was delayed while

making some minor protocol changes thus waiting on various required regulatory approvals which it received and has continued in Canada with results stated above for the CL7000 Protocol Rev E. The FDA/CE Mark licensed biological sealant is resorbed within “10-14” days. The MedClose™ VCS and the FDA/CE Mark biological sealant are not intended for use in supporting or saving lives, or for the purpose of diagnosing, curing, mitigating, or treating disease, or preventing impairment of human health. The FDA licensed biologic sealant does not present a potential for serious risk to health, safety, or welfare of a subject. The Company upon completion of its “Randomized, Prospective, Multi-Center Trial of the MedClose™ VCS” expects to submit several commercial applications to the appropriate worldwide countries of which are approximately 80% of the total applications and market utilizing of this device and eventually submitting a Pre Market Application to the FDA which is for approximately 20% of the worldwide market utilizing this device. This is a trend now being demonstrated by a majority of the worldwide medical device and pharmaceutical companies as the US is no longer the leader but the follower of medical technology by its regulatory infrastructure and processes.

The MedClose™ VCS is a proprietary catheter based system that uses existing FDA/CE Mark approved licensed biological sealant with appropriate approved existing labeling to rapidly seal arterial puncture sites following diagnostic angiography, interventional cardiology and radiological procedures. MedClose™ VCS as stated above has been available for human use in clinical trials but is not presently available for commercialization. MedClose™ VCS is the proprietary property of Med Enclosure, LLC, a subsidiary of CPC of America, Inc (OTCBB: CPCF.OB) of Sarasota, Florida. CPC of America, Inc. has been developing cardiology medical devices since 1996 with its subsidiaries CPCA2000, Inc. and Med Enclosure, LLC. In 2003 the Center for Devices and Radiological Health (“CDRH”) approved the CPCA2000, Inc. device with broad labeling as a Class III medical device.

This news release contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. Such statements are subject to certain risks and uncertainties, and actual circumstances, events or results may differ materially from those projected in such forward-looking statements. Factors that could cause or contribute to differences include, but are not limited to, the risk that the regulatory agencies of various worldwide countries may not approve the commercial application for MedClose™ or, if approved, that any such investigation may be unfavorable; that that CPC may be unable to obtain approval for commercial sale of MedClose™; and the risk that CPC may be unable to obtain capital as and when needed. For a discussion of these and other factors, which may cause actual events or results to differ from those projected, please refer to CPC’s most recent annual report on Form 10-K and quarterly

reports on Form 10-Q, as well as other subsequent filings with the Securities and Exchange Commission. CPC of America, Inc cautions readers not to place undue reliance on any forward-looking statements. CPC does not undertake, and specifically disclaims any obligation, to update or revise such statements to reflect new circumstances or unanticipated events as they occur.

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