

BOX ASSIGNMENTS

A1D581-40

03-06-2000

09/462637
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1.11.00



HEET
S ONLY

TO THE ASSISTANT COMMISSIC
SIR: PLEASE RECORD THE ATT/

101282332

/ THEREOF.

1. NAME OF CONVEYING PARTY(IES) (ASSIGNORS(S)):

- 1. SEGASBY, Mark
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

ADDITIONAL NAME(S) OF CONVEYING PARTY(IES) ATTACHED? YES NO

2. PARTY(IES) (ASSIGNEE(S)) RECEIVING INTEREST:

NAME: TECHNOGYM S.R.L.

ADDRESS: Via G. Perticari, 20 I-47035 Gambettola (Forli) Italy

09/462637

ADDITIONAL NAME(S) & ADDRESS(ES) ATTACHED? YES NO

3. NATURE OF CONVEYANCE (DOCUMENT):

(Submit herewith only one document for recordation—multiple copies of same Assignment signed by different inventors is one document)

ASSIGNMENT OF WHOLE PART INTEREST

CHANGE OF NAME VERIFIED TRANSLATION
 SECURITY MERGER OTHER:

EXEC. DATE: December 28, 1999

EXECUTION DATE(S) ON THE DECLARATION IF FILED HEREWITH: (**NOTE:** IF DATES ON DECLARATION AND ASSIGNMENT DIFFER SEE ATTY!) December 28, 1999

4.5 APPL. NO.(S) OR PAT NO.(S). OTHERS ON ADDITIONAL SHEET(S) attached? YES NO

A. PAT. APP. NO.(S) series code/serial no	M#	1 st INVENTOR if not in item 1	B. PATENT NO(S)	M#	1 st INVENTOR if not in item 1
NEW APPLICATION	265563				

5. Name & Address of Party to Whom Correspondence
Concerning Document Should be Mailed:

Pillsbury Madison & Sutro LLP
Intellectual Property Group
1100 NEW YORK AVENUE, N.W.
NINTH FLOOR, EAST TOWER
WASHINGTON, D.C. 20005-3918

6. NUMBER INVOLVED:
APPLNS 1 + PATS _____ = TOTAL 1

7. AMOUNT OF FEE ENCLOSED: (Code 581)
ABOVE TOTAL x \$40 = \$40

5.5 ATTY DKT:

PMS 265563
MATTER NO.

81T337812US42W
CLIENT REF.

8. IF ABOVE FEE IS MISSING OR INADEQUATE CHARGE
INSUFFICIENCY TO DEPOSIT ACCOUNT NUMBER: 03-3975
UNDER ORDER NO 12189 265563
dup. sheet not required CLIENT NO. MATTER NO.

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.

Signature

Attorney: Timothy J. Klima

Reg. No. 34,852

Atty/Sec: TJK/mhn

Date: January 11, 2000

TEL: (202) 861-3662

FAX: (202) 822-0944

10. Total number of pages including this cover sheet, attachments and document (do not file dup. Cover sheet)

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FILE WITH PTO RETURN RECEIPT (PAT-103A)

