U.S. Department of Commerce

FORM PTO-1619A Expires 06/30/99 OMB 0651-0027

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(Full name o	of second io	oint in	ventor, if any)	CHRIS WA	NG				
(Address)	3F, NO. 72	2, C	HIZHI STREET	SHULIN, TAIP					
(Full name o	of third joint	inver	ntor, if any)	LEO KUAN					
(Address)	2F. NO. 1	12, I	LANE 97, JINO	SHING STRE	ET, WENSHAN,	TAIPEI 116	, R.O.C.		
The	e First ASS	SIGNE	E referred to it	this agreeme	nt is:				
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(Address of	Assignee)	<u> 2F.</u>	NO. 51, TUN	G-HSING ROA	D, TAIPEL, TAI	WAN 105.	R.O.C.		
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