

7-26-00

08-22-2000

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

J.S. Department of Commerce  
Patent and Trademark Office  
PATENT



101438899

08-22-2000 11:25  
C. H. H. H. H.

### RECORDATION FORM COVER SHEET PATENTS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

#### Submission Type

New

Resubmission (Non-Recordation)  
Document ID#

Correction of PTO Error  
Reel #  Frame #

Corrective Document  
Reel #  Frame #

#### Conveyance Type

Assignment  Security Agreement

License  Change of Name

Merger  Other

**U.S. Government**  
(For Use ONLY by U.S. Government Agencies)

Departmental File  Secret File

#### Conveying Party(ies)

Mark if additional names of conveying parties attached

Name (line 1)  Execution Date  
Month  Day  Year

Name (line 2)

**Second Party**

Name (line 1)

Name (line 2)

Execution Date  
Month  Day  Year

#### Receiving Party

Mark if additional names of receiving parties attached

Name (line 1)   If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)

City State/Country Zip Code

#### Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

#### FOR OFFICE USE ONLY

08/22/2000 MTHA11 00000030 29119689  
01 FC:581 40.00 DP

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

PATENT

REEL: 011005 FRAME: 0202

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages**

Enter the total number of pages of the attached conveyance document including any attachments.

#

**Application Number(s) or Patent Number(s)**

Mark if additional numbers attached

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

**Patent Application Number(s)**

**Patent Number(s)**

<input type="text" value="29/119,689"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If this document is being filed together with a new Patent Application, enter the date the patent application was

Month Day Year

**Patent Cooperation Treaty (PCT)**

Enter PCT application number only if a U.S. Application Number has not been assigned.

PCT  PCT  PCT   
PCT  PCT  PCT

**Number of Properties**

Enter the total number of properties involved.

#

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed  Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the

Deposit Account Number: #

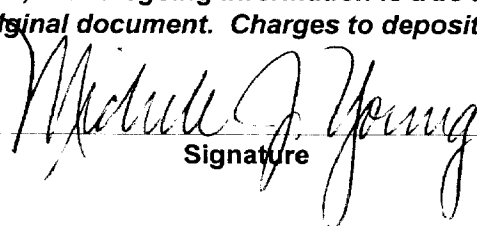
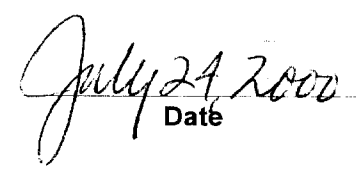
Authorization to charge additional fees: Yes  No

**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. Charges to deposit account are authorized, as indicated herein.

Michele J. Young

Name of Person Signing

Signature

Date

03-14-2000



101288928

### RECORDATION FORM COVER SHEET PATENTS ONLY

MRP 3-6-2000

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

#### Submission Type

New

Resubmission (Non-Recordation)  
Document ID#

Correction of PTO Error  
Reel #  Frame #

Corrective Document  
Reel #  Frame #

#### Conveyance Type

Assignment  Security Agreement

License  Change of Name

Merger  Other

**U.S. Government**  
(For Use ONLY by U.S. Government Agencies)

Departmental File  Secret File

3-6-2000 U.S. PTO  
29/119689  
03/06/00

#### Conveying Party(ies)

Mark if additional names of conveying parties attached

Name (line 1)  Execution Date  
Month Day Year

Name (line 2)

**Second Party**

Name (line 1)

Name (line 2)

Execution Date  
Month Day Year

#### Receiving Party

Mark if additional names of receiving parties attached

Name (line 1)   If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)

City State/Country Zip Code

#### Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

#### FOR OFFICE USE ONLY

03/10/2000 HNSRANI 0000022 29119689

02 FC:581

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

**PATENT**  
REEL: 011005 FRAME: 0204

**Correspondent Name and Address**

Area Code and Telephone Number

(401) 421-3141

Name **SALTER & MICHAELSON**

Address (line 1) **321 South Main Street**

Address (line 2) **Providence, RI 02903-7128**

Address (line 3)

Address (line 4)

**Pages** Enter the total number of pages of the attached conveyance document including any attachments.

# **2**

**Application Number(s) or Patent Number(s)**

Mark if additional numbers attached

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

Patent Application Number(s)

Patent Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If this document is being filed together with a new Patent Application, enter the date the patent application was signed by the first named executing inventor.

Month Day Year  
**Jan. 31, 2000**

**Patent Cooperation Treaty (PCT)**

Enter PCT application number only if a U.S. Application Number has not been assigned.

PCT <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>
PCT <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>

**Number of Properties**

Enter the total number of properties involved.

# **1**

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41): \$

**40.00**

Method of Payment: Enclosed  Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number: # **19-0120**

Authorization to charge additional fees: Yes  No

**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. Charges to deposit account are authorized, as indicated herein.

Jodi-Ann McLane

Name of Person Signing

*Jodi-Ann McLane*

Signature

**03-01-00**

Date

**ASSIGNMENT**

WHEREAS, I/we: YIM, Kin Kuo

(name/citizenship/address): Hong Kong

Room 34, 3/F, Hewlett Centre,

54 Hoi Yuen Road, Kwun Tong,

Kowloon,

Hong Kong

(hereinafter ASSIGNOR(S)), having invented certain new and useful improvements in:

(title) DESIGN FOR AN ENERGY SAVING LIGHT

for which an application for United States Letters Patent was executed concurrently herewith:

WHEREAS, (name/citizenship/address):

SUPER TREND LIGHTING LIMITED (a Hong Kong corporation)

Room 304, 3rd Floor, Hewlett Centre

54 Hoi Yuen Road

Kwun Tong, Kowloon, Hong Kong


(hereinafter ASSIGNEE) is desirous of acquiring the entire right, title and interest in and to said invention and in and to any U.S. Letters Patent, including any priority rights relative thereto, that may be granted therefor;

NOW, THEREFORE, in consideration of the sum of One U.S. Dollar to me/us in hand paid, the receipt whereof is hereby acknowledged, and other good and valuable consideration, said ASSIGNOR(S), has sold, assigned, and transferred, and by these presents does sell, assign and transfer unto said ASSIGNEE the full and exclusive right to the said invention, including any priority rights relative thereto, in the United States and its territorial possessions, and the entire right, title and interest in and to any and all Letters Patent which may be granted therefor in the United States and its territorial possessions and in any and all divisions, reissues, continuations and extensions thereof.

The undersigned hereby authorizes and requests the U.S. Patent and Trademark Office to issue any and all of said Letters Patent, when granted, to said ASSIGNEE, for the sole use and enjoyment of said ASSIGNEE, its heirs, successors and assigns.

The undersigned further agrees that he/she will communicate to said ASSIGNEE or its representative any facts known to it respecting said invention, and will testify in any legal proceedings, sign all lawful papers, execute all divisions, continuations, substitutions, renewal and reissue applications, execute all necessary assignment papers to cause any and all of said Letters Patent to be issued to said ASSIGNEE, make all rightful oaths and generally do everything necessary or desirable to aid said ASSIGNEE to obtain and enforce proper protection for said invention in the United States.

The undersigned hereby grants the law firm of Salter & Michaelson the power to insert on this assignment any further identification which may be necessary in order to comply with the rules of the U.S. Patent and Trademark Office for recordation of this document.

Dated: 31 JAN 2000 By 

Dated: \_\_\_\_\_ By \_\_\_\_\_

Dated: \_\_\_\_\_ By \_\_\_\_\_