

09-25-2000



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8-14-00

**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)

Execution Date
Month Day Year

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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.)

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Address (line 3)
City State/Country Zip Code

Domestic Representative Name and Address

Enter for the first Receiving Party only.

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RECORDATION FORM COVER SHEET
CONTINUATION
PATENTS ONLY

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Name (line 1)		Execution Date Month Day Year
Name (line 2)		
Name (line 1)		Execution Date Month Day Year
Name (line 2)		
Name (line 1)		Execution Date Month Day Year
Name (line 2)		

Receiving Party(ies)

Mark if additional names of receiving parties attached

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Name (line 1)		<input type="checkbox"/> 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
Name (line 1)		<input type="checkbox"/> 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

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)		
			5,133,621		

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)

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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" value="5,133,621"/>	<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
<input type="text"/>	<input type="text"/>	<input type="text"/>

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. #

Fee Amount

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

Method of Payment:
Deposit Account

Enclosed Deposit Account

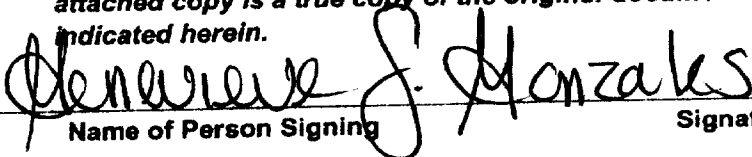
(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number: #

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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.


Name of Person Signing

Signature

Date

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

ASSIGNMENT OF PATENT

Docket Number (optional)

Whereas, I, Edward S. Gonzales of San Diego Calif..., hereinafter referred to as patentee, did obtain a United States Patent for an improvement in The Article and Process for creating Designs on the surface of concrete...

No. 5,133,621, dated July 28, 1992; and whereas, I am now the sole owner of said patent, and,

Whereas, Genevieve Sainz Gonzales of San Diego California...

hereinafter referred to as "assignee" whose post office address is Genevieve S. Gonzales 661 Copper Drive... #55

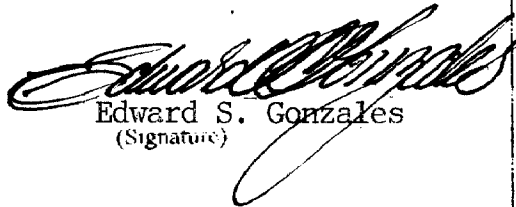
City of Vista, and State of California

is desirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of Twenty dollars (\$ 20), the receipt whereof is acknowledged, and other good and valuable consideration, I, the patentee, by these presents do sell, assign and transfer unto said assignee the entire right, title and interest in and to the said Patent aforesaid; the same to be held and enjoyed by the said assignee for his own use and behoof, and for his legal representatives and assigns, to the full end of the term for which said Patent is granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

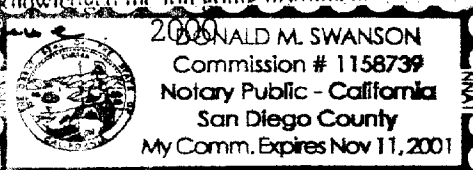
Executed this 27 day of June, 2000.


at 480 Alta Road
San Diego Calif...92179


Edward S. Gonzales
(Signature)

State of California
County of San Diego SS.

Before me personally appeared Edward S. Gonzales
and acknowledged the foregoing instrument to be his free act and deed this 27 day June
of 2000.


DONALD M. SWANSON
Commission # 1158739
Notary Public - California
San Diego County
My Comm. Expires Nov 11, 2001


(Notary Public)

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