

06-18-2003



102476950

RE

**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 6-12-03

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)	<input type="text" value="Chih Jen"/>	Execution Date	<input type="text" value="10/24/02"/>
Name (line 2)	<input type="text" value="Kuo"/>	Month	Day

Second Party

Name (line 1)	<input type="text" value="Miao"/>	Execution Date	<input type="text" value="10/24/02"/>
Name (line 2)	<input type="text" value="Li"/>	Month	Day

Receiving Party

Mark if additional names of receiving parties attached

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 1)	<input type="text" value="360 Degree Web, Inc."/>		
Name (line 2)	<input type="text"/>		
Address (line 1)	<input type="text" value="2700 Augustine Drive"/>		
Address (line 2)	<input type="text" value="Suite 175"/>		
Address (line 3)	<input type="text" value="Santa Clara"/>	<input type="text" value="Ca"/>	<input type="text" value="95054"/>
	<small>City</small>	<small>State/Country</small>	<small>Zip Code</small>

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)

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RECORDATION FORM COVER SHEET
CONTINUATION
PATENTS ONLY

Conveying Party(ies)

Mark if additional names of conveying parties attached

Enter additional Conveying Parties

Name (line 1)

Execution Date
Month Day Year

Name (line 2)

Execution Date
Month Day Year

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Name (line 2)

Execution Date
Month Day Year

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Application Number(s) or Patent Number(s)

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

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. #

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Patent Application Number(s)			Patent Number(s)		
<input type="text" value="10/273,960"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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<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

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: Enclosed Deposit Account


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

Deposit Account Number: #

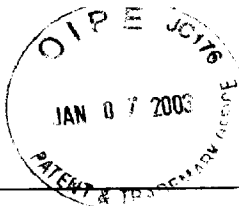
Authorization to charge additional fees: Yes No

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.

Michael A. Glenn  1/7/03

Name of Person Signing Signature Date



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

01-17-2003



102341420

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

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Address (line 2) Suite 175

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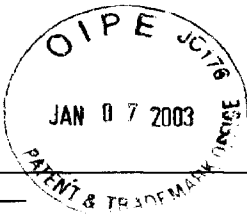
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01/16/2003 DBYRNE 00000045 071445 10273960
01 FC:8021 40.00 CH

PATENT
REEL: 014181 FRAME: 0326



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

RECORDATION FORM COVER SHEET CONTINUATION PATENTS ONLY

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PATENT

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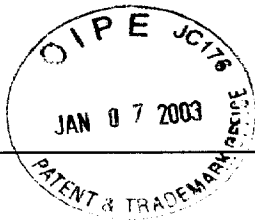
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Expires 06/30/99
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U.S. Department of Commerce
Patent and Trademark Office
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Area Code and Telephone Number

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Michael A. Glenn

1/7/03

Name of Person Signing

Signature

Date

