

Form PTO-1595 (Rev. 06/04)  
OMB No. 0651-0027 (exp. 6/30/2005)

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JAMES E. SATLOFF  
300 CENTRAL PARK WEST - APT. 20G  
NEW YORK, NY 10024-1513

Execution Date(s) FEBRUARY 11, 2004

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

### 3. Nature of conveyance:

- ☐ Assignment ☐ Merger  
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### 2. Name and address of receiving party(ies)

Name: JAMES E. SATLOFF

Internal Address: \_\_\_\_\_

Street Address: 10 GRACIE SQUARE #9E

City: NEW YORK

State: NEW YORK

Country: USA Zip: 10028

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### 4. Application or patent number(s):

☐ This document is being filed together with a new application.

A. Patent Application No.(s)

B. Patent No.(s)

6,688,973  
5,667,319

Additional numbers attached? ☐ Yes ☒ No

### 5. Name and address to whom correspondence concerning document should be mailed:

Name: KARL F. MILDE, JR.

Internal Address: MILDE & HOFFBERG, LLP

Street Address: 10 BANK STREET - STE. 460

City: WHITE PLAINS

State: NEW YORK Zip: 10606

Phone Number: 914-949-3100

Fax Number: 914-949-3416

Email Address: INTPROP@AOL.COM

### 6. Total number of applications and patents involved:

2

### 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 80.00

- ☐ Authorized to be charged by credit card  
☐ Authorized to be charged to deposit account  
☒ Enclosed  
☐ None required (government interest not affecting title)

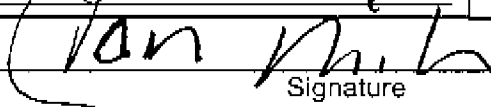
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8/16/03  
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KARL F. MILDE, JR.

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Total number of pages including cover sheet, attachments, and documents: 9

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SATLOFF 201.1 &amp; SATLOFF 202

02-18-2004

Form PTO-1595  
(Rev. 10/02)

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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

JAMES E. SATLOFF

21304

2. Name and address of receiving party(ies)

Name: JAMES E. SATLOFF

Internal Address: \_\_\_\_\_

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance:

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Street Address: 10 GRACIE SQUARE #9E

City: NEW YORK State: NY Zip: 10028

Execution Date: 2/11/04

Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: \_\_\_\_\_

A. Patent Application No.(s) \_\_\_\_\_

B. Patent No.(s) 6,688,973

5,667,319

Additional numbers attached? ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: KARL F. MILDE, JR.

Internal Address: MILDE &amp; HOFFBERG, LLP

Street Address: 10 BANK STREET - STE. 460

City: WHITE PLAINS State: NY Zip: 10606

6. Total number of applications and patents involved: ☒ 2

7. Total fee (37 CFR 3.41).....\$ 80.00

☒ Enclosed☐ Authorized to be charged to deposit account

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9. Signature.

KARL F. MILDE, JR.

Name of Person Signing

Signature

2/11/04

Date

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PATENT

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SATLOFF 201.1-KFM

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent No. : 5,667,319 Patent Date: 9/16/97

Serial No. : 406,109 Filing Date: 3/17/95

FEE ADDRESS CUSTOMER NO.: 010037  
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February 11, 2004

Commissioner for Patents  
P.O. BOX 1450  
Alexandria, VA 22313-1450

Sir:

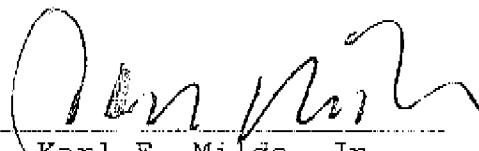
NOTICE OF CHANGE OF ADDRESS OF PATENTEE

Please take notice that the Patentee's address of  
record in the above-identified patent has changed to the  
following address:

10 Gracie Square - #9E  
New York, NY 10028

Respectfully submitted,

By

  
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