



05-21-2004

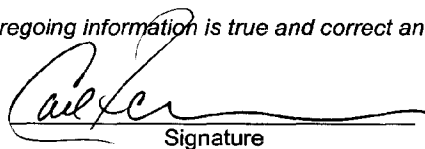


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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof

<p>1. Name of conveying party(ies): <u>S. 18.04</u> Izumi Kuramochi (05/06/2004), Kenichiro Endo (05/06/2004), Hirohisa Hazama (05/06/2004), and Yuji Tomatsu (05/06/2004)</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies) Name: <u>THE YOKOHAMA RUBBER CO., LTD.</u> Internal Address: _____ Street Address: _____  36-11, Shimbashi 5-chome Minato-ku  City: <u>Tokyo</u> Country: <u>JAPAN</u> Zip: _____ Additional name(s) &amp; address(es) attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Nature of Conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: <u>see Box 1, conveying parties</u></p> <p>4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the new application is: _____ A. Patent Application No.(s): <u>29/200,121</u> B. Patent No.(s): _____ Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>David T. Nikaido</u> <u>RADER, FISHMAN &amp; GRAUER PLLC</u> Internal Address: <u>Atty. Dkt.: OGW-0303</u> Street Address: <u>1233 20th Street, N.W.</u> <u>Suite 501</u>  City: <u>Washington</u> State: <u>DC</u> Zip: <u>20036</u></p>	<p>6. Total number of applications and patents involved: <u>1</u></p> <p>7. Total fee (37 CFR 3.41) \$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account <input type="checkbox"/> Authorized to be charged to credit card (Form 2038 enclosed)</p> <p>8. Deposit account number: <u>18-0013</u> (Attach duplicate copy of this page if paying by deposit account)</p>
<p style="text-align: center;"><b>DO NOT USE THIS SPACE</b></p>	
<p>9. Statement and signature. <i>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.</i></p> <p><u>Carl Schaukowitch, Reg. No. 29,211</u>  <u>May 18, 2004</u> Name of Person Signing Signature Date</p> <p>Total number of pages including cover sheet, attachments, and documents: <u>2</u></p>	

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