


FORM PTO-1595 (Rev. 6-93) OMB No. 0651-0011 (exp. 4/94)	RE	 102770886	U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office
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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): <p style="text-align: center;">Jean-Pierre Ducauchuis 6-10-04</p>	2. Name and address of receiving party(ies): Name: APLIX Address: 19 Avenue de Messine 75008 Paris France
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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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	Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Execution Date: May 17, 2004	

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: May 17, 2004

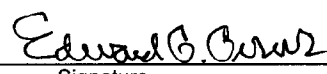
A. Patent Application No.(s)	B. Patent No.(s)
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Additional numbers attached? Yes No 10866372

5. Name and address of party to whom correspondence concerning document should be mailed: Name: Edward G. Greive Renner, Kenner, Greive, Bobak, Taylor & Weber Street Address: Fourth Floor, First National Tower City: Akron State: OH ZIP: 44308-1456	6. Total Number of applications and patents involved: 1 7. Total fee (37 CFR 3.41): \$ <u>40.00</u> <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account
8. In the event that the enclosed fee is not sufficient, the Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment to Deposit Account No. 18-0987. (Attach duplicate copy of this page if paying by deposit account)	

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9. 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.

<u>Edward G. Greive</u> Name of Person Signing	 Signature	<u>6/10/04</u> Date
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Total number of pages including cover sheet, attachments, and document: 3

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IN WITNESS WHEREOF, this assignment has been executed below by the undersigned:

Jean-pierre ducauchuis

Jean-Pierre DUCAUCHUIS

Name:

17 mai 2004
Date I signed this assignment

17 mai 2004
Date I signed Declaration or Oath

Post Office Address: 2 ter rue du Professeur Dubuisson, 44100 NANTES, France

Name:

Date I signed this assignment

Date I signed Declaration or Oath

Post Office Address:

Name:

Date I signed this assignment

Date I signed Declaration or Oath

Post Office Address: