

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

Assignment Division Fax: 1-703-306-5995

Return Fax No. 1-407-841-2343

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

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	Conveyance Type
<input checked="" type="checkbox"/> New	<input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement
<input type="checkbox"/> Resubmission (Non-Recordation) Document ID#	<input type="checkbox"/> License <input type="checkbox"/> Change of Name
<input type="checkbox"/> Correction of PTO Error Reel # Frame #	<input type="checkbox"/> Merger <input type="checkbox"/> Other
<input type="checkbox"/> Corrective Document Reel # Frame #	<p align="center"><i>U.S. Government</i> (For Use ONLY by U.S. Government Agencies)</p> <input type="checkbox"/> Departmental File <input type="checkbox"/> Secret File

Conveying Party(ies)	() Mark if additional names of conveying parties attached	Execution Date Month Day Year
Name (1) <u>Christopher J. De Felice</u>		February 22, 2005
Name (2) _____		
Name (3) _____		Execution Date Month Day Year
Name (4) _____		

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) <u>Aquatunis, Inc.</u>		
Name (line 2) _____		
Address (line 1) <u>531 Lakefront Blvd.</u>		
Address (line 2) _____		
Address (line 3) <u>Winter Park, FL 32789</u>		
City _____ State or Country _____ Zip Code _____		

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) _____	

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

700161795

PATENT
REEL: 015895 FRAME: 0007

CH \$40.00 010484 11062365

FORM PTO-1619B

Expires 06/30/99

OMB 0651-0027

Page 2

U.S. Department of Commerce

Patent and Trademark Office

PATENT

Correspondent Name and Address

Area Code and Telephone Number

(407) 841-2330

Name

Jacqueline E. Hartt

Address (line 1)

Allen, Dyer, Doppelt, Milbrath & Gilchrist, P.A.

Address (line 2)

255 South Orange Avenue, Suite 1401

Address (line 3)

Post Office Box 3791

Address (line 4)

Orlando, FL 32801-3791

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

1

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)

11/062,365

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 Treat (PCT)

Enter PCT application number
only if a U.S. Application Number
has not been assigned.

PCT

PCT

PCT

PCT

PCT

PCT

Number of Properties

Enter the total number of properties involved. # 1

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$ 40.00

Method of Payment:

Enclosed ()

Deposit Account (X)

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

Deposit Account Number:

01-0484

Authorization to charge additional fees:

Yes (X)

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.

Jacqueline E. Hartt

Name of Person Signing


Signature

March 14, 2005

Date

ASSIGNMENT

WHEREAS, **Christopher J. De Felice**, of 14 West Vick Avenue, Oakland, FL 34787, hereinafter referred to as Assignor, has made certain improvements or inventions in **AQUATIC BREATHING APPARATUS, SYSTEM, AND ASSOCIATED METHODS**, for which Assignor has executed an application for United States Letters Patent filed on Feb. 22, 2005, in the United States Patent and Trademark Office and given Serial No. 11/062,365 (herein "the Application"); and

WHEREAS, **AQUATURIS, INC.**, a Florida corporation, and **Zeagle Systems, Inc.**, a Florida corporation, hereinafter collectively referred to as Assignee, is desirous of acquiring the same;

NOW THEREFORE, for and in consideration of One Dollar (\$1.00) lawful money of the United States, and other good and valuable consideration, receipt whereof is hereby acknowledged, Assignor does hereby sell, assign and transfer to Assignee, its successors and assigns, all right, title and interest in and to the Application, the invention or inventions therein shown and described and any improvements on the inventions heretofore or hereafter made, any applications claiming priority thereto, any continuing applications, including divisions, continuations, or continuations-in-part applications, and all patents, United States and foreign, to be granted upon any such applications or for the invention or inventions thereof, and any reissues, continuations or extensions of the patents; and Assignor does hereby authorize and request the Commissioner of Patents to issue all patents on the United States Patent applications or for the invention or inventions hereof, in accordance with this assignment.

And Assignor for the consideration hereby covenants and agrees that Assignor is the owner of the full title herein conveyed and has the right to convey the same, and agrees that Assignor will communicate to Assignee any facts known to Assignor respecting the invention or inventions, and testify in any legal proceedings when called upon by Assignee, sign all lawful papers deemed by Assignee as expedient to vest in it the legal title herein sought to be conveyed or for the filing and prosecution of all applications and patents, United States and foreign, and otherwise aid Assignee, its successors and assigns, in obtaining full patent protection on the invention and enforcing proper protection under the patents, but in every instance at Assignee's expense.

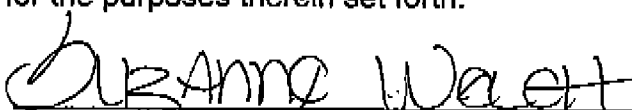
IN WITNESS WHEREOF, I have hereunto set my hand and seal this 22 day of FEBRUARY, 2005.


CHRISTOPHER J. DE FELICE

STATE OF FLORIDA
COUNTY OF ORANGE

On this 22 day of FEBRUARY, 2005, before me personally appeared **Christopher J. De Felice**, who is personally known by me or proved to me on the basis of satisfactory evidence to be the same individual who executed the foregoing assignment, and who acknowledged to me that he/she executed the same of his/her own free will for the purposes therein set forth.




NOTARY PUBLIC
My Commission Expires: 1/1/2006