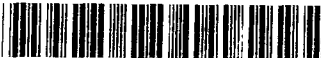
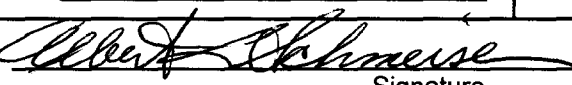


07-08-2005

<b>7-5-05</b>		<b>RECORDATION PA</b>		<b>103036540</b>	<small>new address(es) below.</small>
<b>1. Name of conveying party(ies)</b> Yoon Young Co., Ltd.		<b>2. Name and address of receiving party(ies)</b> Name: <u>AUSTEM CO., LTD.</u> Internal Address: _____ Street Address: <u>462-1, Jangsan-ri, Susin-myeon</u> <u>Chungeheongnam-do</u> City: <u>Cheonan-si</u> State: _____ Country: <u>Korea</u> Zip: <u>330-882</u>			
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			
<b>3. Nature of conveyance/Execution Date(s):</b> Execution Date(s) _____ <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Joint Research Agreement <input type="checkbox"/> Government Interest Assignment <input type="checkbox"/> Executive Order 9424, Confirmatory License <input type="checkbox"/> Other _____		<b>4. Application or patent number(s):</b> <input type="checkbox"/> This document is being filed together with a new application. A. Patent Application No.(s) (1) <u>10/735,034</u> (2) <u>10/823,956</u> (2) <u>10/408,005</u> B. Patent No.(s) (1) <u>6,874,747</u> Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>5. Name and address to whom correspondence concerning document should be mailed:</b> Name: <u>Albert L. Schmeiser</u> Internal Address: _____ Street Address: <u>Schmeiser, Olsen &amp; Watts LLP</u> <u>18 E. Univesity Dr., #101</u> City: <u>Mesa</u> State: <u>AZ</u> Zip: <u>85201</u> Phone Number: <u>480-655-0073</u> Fax Number: <u>480-655-9536</u> Email Address: _____		<b>6. Total number of applications and patents involved:</b> <u>4</u> <b>7. Total fee (37 CFR 1.21(h) &amp; 3.41) \$</b> <u>160.00</u> <input type="checkbox"/> Authorized to be charged by credit card <input checked="" type="checkbox"/> Authorized to be charged to deposit account <input type="checkbox"/> Enclosed <input type="checkbox"/> None required (government interest not affecting title) <b>8. Payment Information</b> a. Credit Card Last 4 Numbers _____ Expiration Date _____ b. Deposit Account Number <u>19-0513</u> Authorized User Name <u>Albert L. Schmeiser</u>			
<b>9. Signature:</b>  Signature Albert L. Schmeiser Name of Person Signing		May 13, 2005 Date Total number of pages including cover <u>1</u>			<u>240E</u>

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:  
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

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PATENT  
REEL: 016735 FRAME: 0740

**ASSIGNMENT COVERSHEET**

**SUBMITTED WITHOUT**

**SUPPORTING DOCUMENTATION**