

01-23-2006

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U.S. DEPARTMENT OF COMMERCE  
and Trademark Office

Form PTO-1595 (Rev. 07/05)  
OMB No. 0651-0027 (exp. 6/30/2008)

RECORDATION I  
**PATEN**



103061622

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

**1. Name of conveying party(ies)**

TECH ALT, INC.

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

**2. Name and address of receiving party(ies)**

Name: SERVICES BY DESIGNWISE

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

Street Address: 5250 CLEVELAND STREET

City: SKOKIE

State: ILLINOIS

Country: USA Zip: 60077

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

**3. Nature of conveyance/Execution Date(s):**

Execution Date(s) DECEMBER 20, 2004

- Assignment  Merger
- Security Agreement  Change of Name
- Joint Research Agreement
- Government Interest Assignment
- Executive Order 9424, Confirmatory License
- Other \_\_\_\_\_

**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)

6,587,441

Additional numbers attached?  Yes  No

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

Name: Jonathan E. Grant

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

Street Address: 2107 HOUNDS RUN PLACE

City: Silver Spring

State: MARYLAND Zip: 20906

Phone Number: 301-603-9071

Fax Number: 301-603-9071

Email Address: GRANTPATEN@AOL.COM

**6. Total number of applications and patents involved: ONE**

**7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00**

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

**8. Payment Information**

a. Credit Card Last 4 Numbers \_\_\_\_\_  
Expiration Date \_\_\_\_\_

b. Deposit Account Number \_\_\_\_\_

Authorized User Name \_\_\_\_\_

**9. Signature:**

08/15/2005 09:01:00 00000129-6587441

01 FC:0021

Signature

Date

JONATHAN E. GRANT

Name of Person Signing

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

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:  
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1460, Alexandria, V.A. 22313-1460

08/11/05 09:28 FAX

03

FILE No. 728 12/20 '04 12:53 ID: CSC

FAX: 775 962 2334

FILE 2/ 2

[Redacted]

Document Number:  
2004038261-6

Filing Date and Time:  
12-20-2004 03:58 PM

UCC FINANCING STATEMENT

PAUL MACANIK  
CO PROCCOR, KIMBLEY & ASSOCIATES, L.P.  
121 C SOUTH COUNTY PARK ROAD  
WHEATON, IL 60157

DEBTORE	ADDRESS	CITY	STATE	ZIP
DEBTORE	5115 BRIMCOTT AVE. SUITE A	AMERINDIAN HEIGHTS	IL	60005
DEBTORE	600 CLEVELAND STREET	CHICAGO	IL	60617

ALL OF DEBTOR'S ACCOUNTS, ACCOUNT RECEIVABLES, GOODS, EQUIPMENT, INVENTORY, MACHINERY, FIXTURES, CASE RECORDS, ALL INTELLECTUAL PROPERTY INCLUDING TRADEMARKS, SERVICE MARKS, TRADE NAMES, COPYRIGHTS, PATENTS, INVENTIONS, INCLUDING PATENT LAUNDRY, INCLUDING THE INTELLECTUAL PROPERTY SET FORTH ON EXHIBIT A, CONTRACTS, AND OTHER THINGS AS SET FORTH IN PARAGRAPH 1 OF THE ASSIGNMENT AGREEMENT, TOGETHER WITH ALL THE ASSIGNMENT, CONTRACTS, AGREEMENTS, INDEMNITY AGREEMENTS AND AGREEMENTS, WHETHER NOW OWNED OR LATER ACQUIRED, FOR THE PURPOSE OF THIS FINANCING STATEMENT, "INVENTORY" MEANS GOODS HELD FOR SALE OR RETURN BY DEBTOR AS NOW OR HEREAFTER PRODUCED, INCLUDING ALL RAW MATERIALS, SUPPLIES, GOODS IN PROCESS, FINISHED GOODS AND ALL OTHER ITEMS CUSTOMARILY CLASSIFIED AS INVENTORY (ALL SO SET FORTH IN EXHIBIT A)

NEVADA

PLEASE OFFER COPY - UCC FINANCING STATEMENT (FORM 1) FOR SIGNATURE

Received at 08/11/05 09:28 FAX

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS AND ANSWER CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b ON RELATED FINANCING STATEMENT)

1a. ORGANIZATION NAME TECHALT, INC.		
1b. PERSON'S LAST NAME	FIRST NAME	MIDDLE NAME/INITIALS

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR A FILIBUS OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - COMPLETE AND PRINT (11a or 11b) - do not abbreviate or use initials

11a. ORGANIZATION NAME			
11b. PERSON'S LAST NAME	FIRST NAME	MIDDLE NAME	OFFICE
11c. STREET ADDRESS	CITY	STATE	POSTAL CODE
11d. COUNTRY			

11e. ORGANIZATION TYPE	11f. TYPE OF ORGANIZATION	11g. ADDITIONAL INFORMATION	11h. UCC USE (INTERNAL USE ONLY)
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12. ADDITIONAL SECURED PARTIES or ASSIGNOR S/P'S NAME - (omit only one name (12a or 12b))

12a. ORGANIZATION NAME		
12b. PERSON'S LAST NAME	FIRST NAME	MIDDLE NAME
MASANKE	PAUL	
12c. STREET ADDRESS	CITY	STATE
520 CLEVELAND STREET	SKOKIE	IL
		ZIP CODE
		60077
		USA

13. This Financing Statement is:  subject to the UCC or  non-secured, or is filed as a  record only.

14. Description of real estate:

15. Name and address of a RECORD OWNER of above-described real estate if different from the above secured interest.

16. Additional secured descriptions:

17. Check box if applicable and attach appropriate form:  Transfer or  Security interest with respect to property held in trust or  Donee or donee

18. Check appropriate box(es) and attach appropriate form:  Motor Vehicle TRANSMITTAL TITLE,  UCC's purchase with a Non-Recourse Transaction - all other 30 year,  First in time with a Public Record Transaction - all other 30 year

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Received on: 01/16/2006 03:19 PM From: [redacted] HP LaserJet FAX

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11/15/2004 18:24 FAX 6308838039

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**EXHIBIT A  
INTELLECTUAL PROPERTY**

**1. SBD System**

**SBD Intellectual Property to transfer to TechAlt  
for In-Car Based Communications, Data Capture, and Video Systems**

**Video Browser Software**

- Vendor information, release letter to vendor

**Fixed Cam Modules**

- Vendor information on boards and assemblies including location of tooling, and mfg. release letter to vendor

**Portable Camera Stand**

- Vendor information on boards and assemblies including location of tooling, and mfg. release letter to vendor

**Portable Cam Module**

- Vendor information on boards and assemblies including location of tooling, and mfg. release letter to vendor

**Enhanced VHS System with Console**

- Vendor information on boards and assemblies including location of tooling, and mfg. release letter to vendor

**Enhanced VHS System without Console**

- Vendor information on boards and assemblies including location of tooling, and mfg. release letter to vendor

**Rear Seat Camera with Microphone Unit**

- Vendor information on boards and assemblies including location of tooling, and mfg. release letter to vendor

3:16 PM 01/16/2006

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
**PAUL MASANEK (847) 445-7928**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**JONATHAN E. GRANT  
 2107 HOUNDS RUN PLACE  
 SILVER SPRING, MARYLAND 20906**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME  
**TECH ALT, INC.**

OR 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
**3311 NORTH KENNICOTT AVENUE, SUITE A, ARLINGTON HTS ILL 66004 USA**

1d. SEE INSTRUCTIONS ADDL INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any  
**NEVADA CORPORA NEVADA NONE KNOWN**  NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME  
**TECHNOLOGY ALTERNATIVES, INC. (SAME AS ABOVE)**

OR 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

2d. SEE INSTRUCTIONS ADDL INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any  
 NONE

3. SECURED PARTY'S NAME (or NAME OF TOTAL ASSIGNEE or ASSIGNOR SP) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME  
**SERVICES BY DESIGNWISE**

OR 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
**5250 CLEVELAND STREET SKOKIE IL 60077 USA**

4. This FINANCING STATEMENT covers the following collateral:

US PAT. NO. 6,587,441

5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (or recorded) in the REAL ESTATE RECORDS. Attach Affidavit. (If applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) (ADDITIONAL FEE) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA

FILING OFFICE COPY — UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02)