

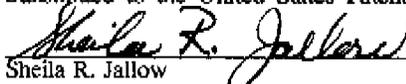
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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
<p>1. Name of Conveying Party(ies):  <b>1. Patrick VIBERT</b>  <b>2. Roger ROUPHAEL</b></p> <p>Additional name(s) of conveying party(ies) attached?  <input type="checkbox"/> Yes     <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies)  Name: <b>SIEMENS VDO AUTOMOTIVE</b>  Address: <b>1, Avenue Paul Ourliac, BP1149, F-31036 Toulouse Cédex 1, FRANCE</b></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: <b>August 31, 2005 and September 29, 2005</b></p>	<p>Additional name(s) and address(es) attached?  <input type="checkbox"/> Yes     <input checked="" type="checkbox"/> No</p>				
<p>4. Application number(s) or patent number(s): _____</p> <p>This document is being filed with a new application, the execution date of the application is:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%; border: none;"> A. Patent Application No(s).  10/550,686 </td> <td style="width: 50%; border: none;"> B. Patent No(s). </td> </tr> </table> <p style="text-align: right;">Additional numbers attached? <input type="checkbox"/> Yes     <input checked="" type="checkbox"/> No</p>			A. Patent Application No(s). 10/550,686	B. Patent No(s).	
A. Patent Application No(s). 10/550,686	B. Patent No(s).				
<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p><b>Customer No.: 00466</b>  <b>YOUNG &amp; THOMPSON</b>  Second Floor  745 South 23<sup>rd</sup> Street  Arlington, VA 22202  Phone: 703-521-2297  Fax: 703-685-0573</p>	<p>6. Total number of applications and patents involved:  <u>1</u></p> <p>7. Total fee (37 CFR 3.41) ..... <b>\$40.00</b>  <input type="checkbox"/> Enclosed  <input checked="" type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit Account No. <b>25-0120</b>  (Attach duplicate copy of this page if paying by deposit account)</p>				
<b>DO NOT USE THIS SPACE</b>					
<p>9. Statement and signature.</p> <p><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> <table style="width:100%; border: none;"> <tr> <td style="width: 35%; border: none;"> <u>Benoit Castel</u>  Name of Person Signing </td> <td style="width: 35%; border: none; text-align: center;">   Signature </td> <td style="width: 30%; border: none; text-align: right;"> <u>July 10, 2006</u>  Date </td> </tr> </table> <p style="text-align: right;">Total number of pages including cover sheet, attachments, and documents: <b>2</b></p>			<u>Benoit Castel</u> Name of Person Signing	 Signature	<u>July 10, 2006</u> Date
<u>Benoit Castel</u> Name of Person Signing	 Signature	<u>July 10, 2006</u> Date			

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