

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

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BenQ Corporation

2. Name and address of receiving party(ies)Name: Watonga Technology, Inc.

Internal Address: _____

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No**3. Nature of conveyance/Execution Date(s):**Execution Date(s) 06/01/2007☐ Assignment☐ Merger☐ Security Agreement☐ Change of Name☐ Joint Research Agreement☐ Government Interest Assignment☐ Executive Order 9424, Confirmatory License☒ Other re-record to correct Assignee's address
original rec/frame: 019805/0630Street Address: 1000 E. William Street, Ste. 204City: Carson CityState: NVCountry: USA Zip: 89701Additional name(s) & address(es) attached? ☐ Yes ☒ No**4. Application or patent number(s):**☐ This document is being filed together with a new application.

A. Patent Application No.(s)

10/709,072, 10/967,424, 10/908,777, 11/505,030, 11/456,251

B. Patent No.(s)

6,052,119, 6,909,601, 7,068,497, 7,176,932, 7,180,835Additional numbers attached? ☐ Yes ☒ No**5. Name and address to whom correspondence concerning document should be mailed:**Name: David R. StevensInternal Address: Stevens Law GroupStreet Address: P.O. Box 1667City: San JoseState: CA Zip: 95109Phone Number: 408-288-7588Fax Number: 408-288-7542Email Address: dave.stevens@stevenslawgroup.com**6. Total number of applications and patents involved:** 10**7. Total fee (37 CFR 1.21(h) & 3.41)** \$400☐ 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 _____

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b. Deposit Account Number 50-2421Authorized User Name David R. Stevens**9. Signature:**

Signature

10/9/2007

Date

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☒ Assignment☐ Merger☐ Security Agreement☐ Change of Name☐ Joint Research Agreement☐ Government Interest Assignment☐ Executive Order 9424, Confirmatory License☐ Other**2. Name and address of receiving party(ies)**

Name: Watonga Technology, Inc.

Internal Address: _____

Street Address: P.O. Box 4860

City: Incline Village

State: NV

Country: USA Zip: 89450

Additional name(s) & address(es) attached? ☐ Yes ☒ No**4. Application or patent number(s):**☐ This document is being filed together with a new application.

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Additional numbers attached? ☐ Yes ☒ No**5. Name and address to whom correspondence concerning document should be mailed:**

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