

# PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT										
NATURE OF CONVEYANCE:	ASSIGNMENT										
<b>CONVEYING PARTY DATA</b>											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Name</th> <th style="width: 30%;">Execution Date</th> </tr> </thead> <tbody> <tr> <td>Shlomo Raz</td> <td>05/18/1999</td> </tr> <tr> <td>Mordechay Beyar</td> <td>05/18/1999</td> </tr> <tr> <td>Oren Globerman</td> <td>05/18/1999</td> </tr> </tbody> </table>		Name	Execution Date	Shlomo Raz	05/18/1999	Mordechay Beyar	05/18/1999	Oren Globerman	05/18/1999		
Name	Execution Date										
Shlomo Raz	05/18/1999										
Mordechay Beyar	05/18/1999										
Oren Globerman	05/18/1999										
<b>RECEIVING PARTY DATA</b>											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Name:</td> <td>AMS Research Corporation</td> </tr> <tr> <td>Street Address:</td> <td>10700 Bren Road West</td> </tr> <tr> <td>City:</td> <td>Minnetonka</td> </tr> <tr> <td>State/Country:</td> <td>MINNESOTA</td> </tr> <tr> <td>Postal Code:</td> <td>55343</td> </tr> </table>		Name:	AMS Research Corporation	Street Address:	10700 Bren Road West	City:	Minnetonka	State/Country:	MINNESOTA	Postal Code:	55343
Name:	AMS Research Corporation										
Street Address:	10700 Bren Road West										
City:	Minnetonka										
State/Country:	MINNESOTA										
Postal Code:	55343										
<b>PROPERTY NUMBERS Total: 1</b>											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Property Type</th> <th style="width: 70%;">Number</th> </tr> </thead> <tbody> <tr> <td>Application Number:</td> <td>12346080</td> </tr> </tbody> </table>		Property Type	Number	Application Number:	12346080						
Property Type	Number										
Application Number:	12346080										
<b>CORRESPONDENCE DATA</b>											
<p>Fax Number: (952)930-5789</p> <p><i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i></p> <p>Phone: 9529306122</p> <p>Email: greg.koeller@AMMD.com</p> <p>Correspondent Name: Gregory L. Koeller</p> <p>Address Line 1: 10700 Bren Road West</p> <p>Address Line 2: Patent Dept.</p> <p>Address Line 4: Minnetonka, MINNESOTA 55343</p>											
ATTORNEY DOCKET NUMBER:	AMS-154A-US										
NAME OF SUBMITTER:	Gregory L. Koeller										
<p>Total Attachments: 2</p> <p>source=Parent Assignment dtd 05-18-1999#page1.tif</p>											

CH \$40.00 12346080

**500886806**

**PATENT**  
**REEL: 022830 FRAME: 0003**



## ASSIGNMENT OF INVENTION

### PATENT

For: ☒ U.S. and/or ☒ Foreign Rights  
For: ☒ U.S. Application or ☐ U.S. Patent  
By: ☒ Inventor(s) or ☐ Present Owner

In consideration of the payment by ASSIGNEE to ASSIGNOR of the sum of One Dollar (\$1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,

### ASSIGNOR (Inventor or person or entity who owns the invention):

Type or print name(s) of ASSIGNOR(S), Address and Nationality

Shlomo Raz  
924 Westwood Blvd., Ste. 520  
Los Angeles, CA 90029  
Citizenship: US

Mordechay Beyar  
6 Eshkolit Street  
Caesarea 38900, Israel  
Citizenship: Israel

Oren Globerman  
c/o Influence Medical Technologies, Ltd.  
12 Hasadnaot Street  
Herzelia B. 46728 Israel  
Citizenship: Israel

hereby sells, assigns, and transfers to

### ASSIGNEE:

Type or print name of ASSIGNEE, Address and Nationality

Influence Medical Technologies, Ltd.  
12 Hasadnaot Street  
Herzelia B. 46728 Israel

and the successors, assigns and legal representatives of the ASSIGNEE

(complete one of the following)

☒ the entire right, title and interest  
☐ an undivided \_\_\_\_\_ percent (\_\_\_\_%) interest for the United States and its territorial possessions

(check the following box if foreign rights are also to be assigned)

☒ and in all foreign countries, including all rights to claim priority,

in and to any and all improvements which are disclosed in the invention entitled:

*Methods and Apparatus for Correction of Urinary and Gynecological Pathologies,  
Including Treatment of Male Incontinence and Female Cystocele*

Attorney File No.: 2117.054

(check and complete (a), (b), (c), or (d))

and which is found in:

- (a) ☐ U.S. patent application executed on even date herewith.  
(b) ☐ U.S. patent application executed on \_\_\_\_\_.  
(c) ☒ U.S. patent application Serial No. 09/296,735 filed on 4/22/99.  
(d) ☐ U.S. Patent No. \_\_\_\_\_ issued on \_\_\_\_\_.

☐ A change of address to which correspondence is to be sent regarding patent maintenance fees is being sent separately.

(also check (e) if foreign application(s) is also being completed)

- (e) ☒ and any legal equivalent thereof in a foreign country, including the right to claim priority.

and, in and to, all Letters Patent to be obtained for said invention by the above application or any continuation, division, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment;

ASSIGNOR further covenants that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent and legal equivalents as may be known and accessible to ASSIGNOR and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce all application, said invention and said Letters Patent and said equivalents thereof which may be necessary or desirable to carry out the purposes thereof.

IN WITNESS WHEREOF, I/We have hereunto set hand and seal this 18 MAY 99  
(Date of Signing)

NOTE: Date of signing must be the same as the date of execution of the application if item (a) was checked above.

Shlomo Raz

Mordechay Beyar

Oren Globberman

If ASSIGNOR is a legal entity complete the following information:

\_\_\_\_\_  
Type or print name of the above person authorized to sign for ASSIGNOR

\_\_\_\_\_  
Title

NOTE: No witnessing, notarization or legalization is necessary. If the assignment is notarized or legalized then it will only be prima facie evidence of execution 35 USC 261. Use next page if notarization is desired.

\_\_\_\_\_  
Notarization or Legalization Page Added.