



**COVER SHEET**  
**NLY**

10-15-02

TO THE ASSISTANT COMMISSIONER

102248467

Record the attached original documents or copy thereof.

1. Name of conveying party(ies): (If multiple assignors, list numerically)

KINDERVIEW, INC.

- Individual
- Association
- General Partnership
- Limited Partnership
- Corporation - State Nevada
- Other:

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

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

**Name:** KNOBBE, MARTENS, OLSON & BEAR, LLP  
**Internal Address:** Fourteenth Floor  
**Street Address:** 2040 Main Street  
**City:** Irvine **State:** CA **ZIP:** 92614

- Individual
- Association
- General Partnership
- Limited Partnership
- Corporation - State
- Other:

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No

(Designations must be a separate document from Assignment)  
Additional name(s) and address(es) attached?  
 Yes  No

3. Nature of conveyance:

- Assignment
- Merger
- Security Agreement
- Change of Name
- Other: Security Interest

Execution Date: (If multiple assignors, list execution dates in numerical order corresponding to numbers indicated in 1 above) **September 13, 2002**

4. Application number(s) or registration number(s):

- a. Trademark Application No(s):
- b. Trademark Registration No(s):

Additional numbers attached?  Yes  No

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

**Name:** James B. Bear  
KNOBBE, MARTENS, OLSON & BEAR, LLP  
**Customer No.** 20,995  
**Internal Address:** Fourteenth Floor  
**Street Address:** 2040 Main Street  
**City:** Irvine **State:** CA **ZIP:** 92614  
**Attorney's Docket No.:** KINDER.UCCI

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

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number: 11-1410

Please charge this account for any additional fees which may be required, or credit any overpayment to this account.

6. Total number of applications and registrations involved: 1

9. Statement and signature.

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.

James B. Bear  
Name of Person Signing

Signature

Date 10/14/02

Total number of pages including cover sheet, attachments and document: 3

Mail documents to be recorded with required cover sheet information to:

U.S. Patent and Trademark Office  
Attn: Assignment Division  
Crystal Gateway-4  
1213 Jefferson Davis Highway, Suite 320  
Arlington, VA 22202

10/16/2002 DBYRNE 00000150 75466940

01 FC:8521 40.00 OP

# Patent Status Report

# Exhibit "A"

Case Number	Title of Invention	Country	Status	Application Number	Filing Date	Patent Number	Issue Date
KINDER.002A	ENCRYPTED VIRTUAL PRIVATE NETWORK FOR ACCESSING REMOTE SENSORS INCLUDING IMAGE SHARING	US	Pending	09/216700	12/18/98		

# Trademark Status Report

Case Number	Trademark Name	Class	Country	Status	Application Number	Filing Date	Reg Number	Reg Date	Renewal Date
KINDER.004T	KINDERVIEW	42	US	REGISTERED	75/466940	4/13/98	2323033	2/29/00	2/28/10

DEAN HELLER  
SECRETARY OF STATE

SEP 13 2 06 PM '02

FILED  
CARSON CITY  
NEVADA

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] <b>Cristina Diaz 949-863-5781</b>	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)  <div style="border: 1px solid black; padding: 5px;"> <p>Knobbe, Martens, Olson &amp; Bear, LLP            Attn: Cristina Diaz            2040 Main Street            14th Floor            Irvine, Ca 92614</p> </div>	

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 <b>Kinderview, Inc.</b>					
OR	1b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS <b>8304 Clairemont Mesa Blvd., Suite 202 San Diego</b>		CITY	STATE	POSTAL CODE	COUNTRY
		<b>CA</b>	<b>92111</b>	<b>US</b>	
1d. TAX ID # SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION <b>Corp.</b>	1f. JURISDICTION OF ORGANIZATION <b>NV</b>	1g. ORGANIZATIONAL ID #, if any <b>C9054-1998</b>	<input type="checkbox"/> 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					
OR	2b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID # SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	<input type="checkbox"/> NONE

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

3a. ORGANIZATION'S NAME <b>Knobbe, Martens, Olson &amp; Bear, LLP</b>					
OR	3b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS <b>2040 Main Street, 14th Floor</b>		CITY <b>Irvine</b>	STATE <b>CA</b>	POSTAL CODE <b>92614</b>	COUNTRY <b>CA</b>

4. This FINANCING STATEMENT covers the following collateral:

"All of debtor's intellectual property which is the subject of secured party's representation, on any recoveries from litigation involving such intellectual property and on any other proceeds of such intellectual property, including but not limited to the property described on Attachment A hereto."

See Attached Exhibit "A"

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 [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [if applicable] [ADDITIONAL FEE]		[optional]		All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA						