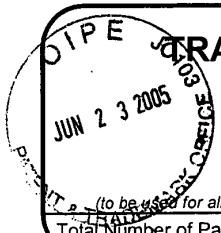


B100
2131



TRANSMITTAL FORM

Application Number		09/861,229
Filing Date		May 17, 2001
First Named Inventor		Yigal Mordechai EDERY
Art Unit		2131
Examiner Name		Christopher A. REVAK
Attorney Docket Number		43426.00014
Total Number of Pages in This Submission	14	

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input checked="" type="checkbox"/> Assent of Assignee To Correction And/Or Addition of Inventor(s) (2 pgs) <input checked="" type="checkbox"/> Inventor Statement Regarding Inventorship Error (1 page) <input checked="" type="checkbox"/> Statement Under 37 CFR 3.73 (b) (1 pg) <input checked="" type="checkbox"/> Declaration For Utility Or Design Patent Application (37 CFR 1.63) (5 pages) <input checked="" type="checkbox"/> Copy of Assignment of Shlomo Touboul (2 pages) <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<p>Remarks</p>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Squire, Sanders & Dempsey, L.L.P. 600 Hansen Way Palo Alto, CA 94304-1043		
Signature			
Printed Name	Marc A. Sockol		
Date	June 21, 2005	Reg. No.	40,823

CERTIFICATE OF TRANSMISSION/MAILING

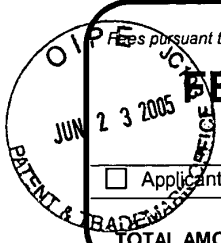
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Eileen M. Janikowski	Date	June 21, 2005

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Effective on 12/08/2004.
 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT		(\$)		Complete if Known	
		130.00		Application Number	09/861,229
				Filing Date	May 17, 2001
				First Named Inventor	Yigal Mordechai EDERY
				Examiner Name	Christopher A. REVAK
				Art Unit	2131
				Attorney Docket No.	43426.00014

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify) : _____

Deposit Account Deposit Account Number: 05-0150 Deposit Account Name: Squire, Sanders & Dempsey, L.L.P.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

Under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee(\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
_____ -20 or HP=	_____ x	_____ =	_____	_____	_____	_____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee(\$)	Fee Paid (\$)
_____ - 3 or HP=	_____ x	_____ =	_____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 =	_____ / 50 =	_____ (round up to a whole number) x	_____ =	_____

4. OTHER FEE(S)

Other (e.g., late filing surcharge) :	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	_____
Other (e.g., late filing surcharge) : Request to Correct Inventorship	130.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	40,823	Telephone	(650) 856-6500
Name (Print/Type)	Marc A. Sockol	Date	June 21, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re Application of:

Examiner: Christopher A. REVAK

Yigal Mordechai EDERY, et al.

Serial No.: 09/861,229

Art Unit: 2131

Filed: May 17, 2001

Title: MALICIOUS MOBILE CODE RUNTIME MONITORING SYSTEM AND METHODS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST TO CORRECT INVENTORSHIP

Sir:

Please amend the inventorship to add Shlomo Touboul, Pardesia Israel, citizen of Israel as an inventor.

Respectfully Submitted,

Dated: June 21, 2005

SQUIRE, SANDERS & DEMPSEY L.L.P.
600 Hansen Way
Palo Alto, CA 94304-1043
650-856-6500

Marc A. Sockol
Attorney for Applicants
Reg. No. 40,823

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

Date: June 21, 2005

By:

Eileen M. Janikowski

06/24/2005 CCHAU1 00000059 050150 09861229
01 FC:1464 130.00 DA

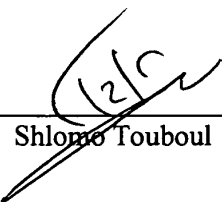


43426.00014
Application No. 09/861,229

INVENTOR STATEMENT REGARDING INVENTORSHIP ERROR

The error in inventorship occurred inadvertently. There was no deceptive intention on my part. Therefore, I would like my name to be added to application no. 09/861,229..

Date: March 6, 2005



Shlomo Touboul



PTO/SB01 (08-03)
 Approved for use through 07/31/2006. OMB 0651-0032
 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted With Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	43426.00014
	First Named Inventor	Yigal EDERY
	COMPLETE IF KNOWN	
	Application Number	09/861,229
	Filing Date	May 17, 2001
	Art Unit	2152
Examiner Name	Unknown	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MALICIOUS MOBILE CODE RUNTIME MONITORING SYSTEM AND METHODS

the specification of which (Title of the Invention)

is attached hereto
 OR
 was filed on (MM/DD/YYYY) 5/17/2001 as United States Application Number or PCT International Application Number 09/861,229 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 3]

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