


FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90356 018 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F99000002427			
1. Entity Name Ciera Network Systems, Inc.			
Principal Place of Business 1250 WOOD BRANCH PARK DRIVE SUITE 600 HOUSTON, TX 77079		Mailing Address 1250 WOOD BRANCH PARK DRIVE SUITE 600 HOUSTON, TX 77079	
2. Principal Place of Business 1250 Wood Branch Park		3. Mailing Address 1250 Wood Branch Park	
Suite, Apt. #, etc. Dr.		Suite, Apt. #, etc. Dr.	
City & State Houston, TX		City & State Houston, TX	
Zip 77079		Country USA	
4. FEI Number 76-0593650		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when retreating.)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP CSD LIVINGSTON, ROBERT 1250 WOOD BRANCH PARK DR, #600 HOUSTON, TX 77079		TITLE NAME STREET ADDRESS CITY-STATE-ZIP P Livingston, Robert W. 1250 Wood Branch Park Drive Houston, TX 77079	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP S Miller, James H. 1250 Wood Branch Park Drive Houston, TX 77079	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP D Licata, Paul 1250 Wood Branch Park Drive Houston, TX 77079	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with this address, with all other like empowered.			
SIGNATURE: RW Livingston		4-29-03 281-529-4030	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Robert W. Livingston, President		Date Daytime Phone #	

CR20034 (10/02)