## FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 FORM D

UNIFORM LIMITED OFFERING EXEMPLION

BECEIVED 1291

OMB APPROVAL

OMB Number:

Expires:

Estimated average burden hours per response .....

NOTICE OF SALE OF SECURITIES 2 2 2003

PURSUANT TO REGULATION D, SECTION 4(6), AND/OR SEC USE ONLY
Prefix Serial

DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and inc	dicate change.)				
Series D2 Preferred Stock and Series X Preferred Stock and the Common Stock issuab	le upon conversion thereof.				
Filing Under (Check box(es) that apply):	Rule 506 ☐ Section 4(6) ☐ ULOE				
Type of Filing: New Filing Amendment					
A. BASIC IDENTIFICATION D	ATA				
Enter the information requested about the issuer					
Name of Issuer ( check if this is an amendment and name has changed, and indic	cate change.)				
Corona Networks, Inc					
Address of Executive Offices: (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
630 Alder Drive; Milpitas, CA 95035	(408) 519-3800				
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
(if different from Executive Offices)					
Brief Description of Business					
IP Service Provider	DDACESSF				
Type of Business Organization	- TANGEROES				
☐ corporation ☐ limited partnership, already formed	other (please specify):				
business trust limited partnership, to be formed	ALK %3 ZUU3				
Month Year	THOWSON				
Actual or Estimated Date of Incorporation or Organization: 1 1 9 8	Actual Estimated				
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevi					
Name of Issuer (	Telephone Number (Including Area Code)  (408) 519-3800  Telephone Number (Including Area Code)  PROCESS  APR 23 200  THOWSON FINANCIAL attion for State:				

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee:

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (1/94)

	A. BASIC IDEN	TIFICATION DATA 📖	ara da mara da ara da	
2. Enter the information requested for the follow	ving:			
• Each promoter of the issuer, if the issuer l	has been organized within	the past five years;		
<ul> <li>Each beneficial owner having the power issuer;</li> </ul>	to vote or dispose, or dire	ect the vote or disposition o	of, 10% or more of	a class of equity securities of the
Each executive officer and director of cor	porate issuers and of corp	orate general and managing	g partners of partne	ership issuers; and
Each general and managing partner of par	-			•
Check Box(es) that Apply: Promoter	⊠Beneficial Owner	Executive Officer	□ Director	General and/or
Check Box(es) that Apply.	Magneticial owlice		Z Director	Managing Partner
Full Name (Last name first, if individual)				
Dhara, Narendra  Business or Residence Address (Number an	1 Charles City Charles 7:- 0	Code		
630 Alder Drive; Milpitas, CA 95035	d Street, City, State, Zip (	Lode)		
Check Box(es) that Apply:  Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Li, Stephen  Business or Residence Address (Number an	d Street, City, State, Zip (	^ode)		
6F, No. 15, Section 2, Ti-Ding Avenue, Taipei,		oue)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
McConnell, Thomas  Business or Residence Address (Number an	d Street, City, State, Zip (	~ada)		
630 Alder Drive; Milpitas, CA 95035	d Street, City, State, Zip (	ode)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				<u> </u>
Payne, Steve				
Business or Residence Address (Number an 255 Shoreline Drive, Suite 510; Redwood City,	d Street, City, State, Zip (	Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or
				Managing Partner
Full Name (Last name first, if individual)				
Pickering, David  Business or Residence Address (Number an	d Street, City, State, Zip (	ode)		
95 Greene Street, 7th Floor; Jersey City, NJ 07:	302	3000)		
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if individual)		<u></u>	<del></del>	Trianging 1 minor
Singh, Raj				
Business or Residence Address (Number an 630 Alder Drive; Milpitas, CA 95035	d Street, City, State, Zip (	Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Reddy, CN				
Business or Residence Address (Number and	d Street, City, State, Zip (	Code)		
630 Alder Drive; Milpitas, CA 95035  Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			· · · · · · · · · · · · · · · · · · ·	
Singh, Ramandeep  Business or Residence Address (Number and	d Street, City, State, Zip C	'ode)		
630 Alder Drive; Milpitas, CA 95035	a oneer, Ony, orace, 21p (	ouc)		

			ITFICATION DATA		A CONTRACTOR OF THE PROPERTY O
2. Enter the information requested		•			
<ul> <li>Each promoter of the issue</li> </ul>	r, if the issuer h	as been organized within	the past five years;		
<ul> <li>Each beneficial owner have issuer;</li> </ul>	ing the power to	vote or dispose, or dire	ct the vote or disposition o	f, 10% or more of	a class of equity securities of the
<ul> <li>Each executive officer and</li> </ul>	director of corp	orate issuers and of corp	orate general and managing	partners of partner	rship issuers; and
Each general and managing	g partner of part	nership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	⊠Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if indiv Robertson, David L.	·				
Business or Residence Address 630 Alder Drive; Milpitas, CA 95	`	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if indiv Rao, Shekar					
Business or Residence Address 630 Alder Drive; Milpitas, CA 95		Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	⊠Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if indiv Ignite Ventures II, L.P.					
Business or Residence Address 255 Shoreline Drive, #510, Redw	•	Street, City, State, Zip C 4065	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if indiv					
Merrill Lynch Ventures L.P. 200		0: 0: 7: 0	1 1		
Business or Residence Address 95 Greene Street, 7th Floor, Jerse		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if indiv					
New Enterprise Associates 9, L.P		0 0 0 7	1 1		
Business or Residence Address 2490 Sandhill Road, Menlo Park	`	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if indiv New Enterprise Associates 10, L.					
Business or Residence Address 2490 Sandhill Road, Menlo Park,	(Number and	Street, City, State, Zip C	ode)		

(use blank sheet, or copy and use additional copies of this sheet, as necessary)

		453 4 5			B.	INFORM	ATION AB	OUT OFFI	ERING		118-27	4		
1.	Has the								_				Yes	No ⊠
	••••••••		•••••				ımn 2, if fili			••••••	•••••••••	••••••		
2.	What is	the minir	num investr			•	·	-		•••••			N/A	
3. ]	Does the	e offering	permit join	t ownership	of a single	unit?				•••••			Yes ⊠	No
: :	similar r associate dealer.	remunerat ed person If more th	ion for soli	citation of p f a broker o persons to l	ourchasers in r dealer reg	n connection istered with	n with sales the SEC ar	of securities id/or with a	s in the offer state or stat	ing. If a per es, list the n	, any commi son to be list ame of the b forth the info	ted is an roker or		
Full	Name (	Last nam	e first, if inc	dividual)										
Busin	ness or R	Residence	Address (N	lumber and	Street, City	, State, Zip	Code)	<del></del>	······································					
Name	of Asso	ociated B	roker or De	aler	· · · · · · · · · · · · · · · · · · ·									
States	s in Whi	ich Person	Listed Has	s Solicited o	or Intends to	Solicit Pur	chasers							
(Cl	heck "A	Il States"	or check in	dividual Sta	ates)	•••••							☐ All	States
[AL]		AK]	[ AZ]	[ AR ]	[ CA]	[CO]	[CT]	[DE]	[DC]	[ FL ]	[GA]	[ HI ]	[ ]]	•
[ IL ]		IN ] NE ]	[ IA ] [ NV]	[ KS ] [ NH ]	[ KY] [ NJ ]	[ LA ] [ NM]	[ ME] [ NY ]	[ MD] [ NC]	[MA] [ND]	[ MI ] [ OH ]	[ MN] [ OK ]	[MS]	[ M [ P.	_
[ RI]	] [	sc j	[ SD ]	[ TN]	[TX]	[עד]	[VT]	[VA]	[WA]	[wvj	[wi]	[WY]	[ P]	-
Fuli N	Name (L	ast name	first, if indi	vidual)										
Bucin	acc or D	Pasidanca	Address (A	lumbar and	Street City	, State, Zip	Code)							
Dusin	1C33 01 IV	Coldence	Address (IV	ramber and	Sireet, City	, State, Zip	code)							
Name	of Asso	ociated B	roker or De	aler						, · ·				
States	in Whi	ch Persor	Listed Has	s Solicited o	or Intends to	Solicit Pur	chasers							
(Cl	neck "A	ll States"	or check in	dividual Sta	ites)	•••••		•••••					☐ All	States
[AL]		AK]	[AZ]	[ AR ]	[ CA ]	[CO]	[ CT]	[ DE]	[DC]	[ FL ]	[GA]	[ HI ]	[ II	-
[ IL ] [ MI ]	_	IN ] NE]	[ IA ] [ NV]	[ KS ] [ NH ]	[ KY] [ NJ ]	[ LA ] [ NM]	[ ME] [ NY ]	[ MD] [ NC]	[ MA] [ ND]	[ MI ] [ OH ]	[ MN] [ OK ]	[ MS] [ OR]	[ M <sup>1</sup> [ PA	
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Full	vame (L	ast name	first, if indi	vidual)										
Busin	ess or R	Lesidence	Address (N	umber and	Street, City	, State, Zip	Code)							
Name	of Acce	oiotod D	roker or Dea	alor							· · · · · · · · · · · · · · · · · · ·			
Name	01 ASSC	cialcu Di	okei oi Dei	aici										
States	in Whi	ch Persor	Listed Has	Solicited o	r Intends to	Solicit Pur	chasers			<del>-</del>				
(Ch	neck "Al	Il States"	or check in	dividual Sta	ıtes)		•••••	••••		••••••	•••••		☐ All	States
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[ MI]	[]	NE]	[ IA ] [ NV]	[ KS ] [ NH ]	[ KY] [ NJ ]	[ LA ] [ NM]	[ ME] [ NY]	[ MD] [ NC]	[ MA] [ ND]	[ MI ] [ OH ]	[ MN] [ OK]	[ MS] [ OR ]	[ M(	
[ RI ]	] [	SC]	[ SD ]	[ TN ]	[ TX ]	[ UT]	[ VT]	[ VA]	[WA]	[ WV]	[ WI]	[ WY]	[ PF	[ [

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF I	ROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		
	Equity	\$10,245,287.91	\$10,245,287.91
	☐ Common ☒ Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify)		
		010 017 007 01	C10 0 15 005 01
	Total	\$10,245,287.91	\$10,245,287.91
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	20	\$10,245,287.91
	Non-accredited Investors		, ,
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		
	and the second of the second o		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	Security	Sold
	Regulation A		
	Rule 504		
	Total		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate		
	and check the box to the left of the estimate.  Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	🖾	\$75,000.00
	Accounting Fees		\$
	Engineering Fees		\$ \$
	Other Expenses (identify) Travel Expenses and Business Expenses		\$
	Total	🖾	\$75,000.00

#### GDSVF&H\494464.1

1. The Series X Preferred Stock was issued in exchange for previously outstanding Preferred Stock.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND I	JSE OF	PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C - Question total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross p to the user."	roceeds		\$10,170,287.91
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the set forth in response to Part C - Question 4.b above.	e box to		
			Payments to Officers, Directors and Affiliates	Payments to Others
	Salaries and fees			
	Purchase of real estate			
	Purchase, rental or leasing and installation of machinery and equipment			
	Construction or leasing of plant buildings and facilities			
	Acquisition of other businesses (including the value of securities involved in this			
	offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)			•
	Repayment of indebtedness			
	Working Capital			\$10,170,287.91
	Other (specify): security investments; costs and expenses related thereto			
	Other (specify):			
	Column Totals			

\$10,170,287.91

Total Payments Listed (column totals added).....

#### D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Corona Networks, Inc.	6	04/15/03
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Ramandeep Singh	President and Chief Executive Officer	

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

						E. STA	TE SIGNAT	TURE	t d'e		 1			
1.	If any part such rule?	-	ed in 17	CFR 230.25		e) or (f) prese	-	-	_	_		Ye [	s ]	No
					See A	Appendix, Co	olumn 5, for	state res	ponse.					

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Corona Networks, Inc.	6	04/15/03
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Ramandeep Singh	President and Chief Executive Officer	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APP	ENDIX			i de la companya de	
1	to non-	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-ltern 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
			Series D2 and Series X Preferred Stock	Number of Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AL									
AK									
AZ	ļ								
AR	ļ								
CA		X	\$0.126 <sup>2</sup>	11	\$9,613,218.11				X
СО									
CT									
DE									
DC									
FL									
GA									
НІ									
ID									
IL									
IN									
IA									
KS									
ΚY			_						
LA									
ME									
MD									
MA									
MI									
MN									
MS					****				
МО									

### GDSVF&H\494464.1

2. The price for the Series X Preferred Stock is for filing purposes only.

			Parks said respectively	API	PENDIX				
1		2	3			4		5	
	to non-	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
			Series D2 and Series X Preferred Stock	Number of Accredited		Number of Non-Accredited			
State	Yes	No	Treferred Stock	Investors	Amount	Investors	Amount	Yes	No
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX			ı						
UT									
VT									
VA									
WA									
WV									
WI									
WY					`				
PR									

<sup>\*</sup> Nine (9) accredited investors from Taiwan for the total of \$536,858.24.