

020634 - TX

ORIGINAL

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | |
|--|---|---------------------------------------|
| <ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | A. Received by (Please Print Clearly) V Gonzalez | B. Date of Delivery 10-9-02 |
| 1. Article Addressed to: 020634 NTERA, Inc. 1020 N.W. 163rd Drive MIami FL 33169-5818 | C. Signature X <i>[Signature]</i> | |
| 2. Article Number (Transfer from service label) 7000 0600 0026 4144 4871 | D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| PS Form 3811, March 2001 | Domestic Return Receipt | 102595-01-M-1424 |
| 3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. | | |
| 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes | | |

AUS _____
 CAF _____
 CMP _____
 COM _____
 CTR _____
 ECR _____
 GCL _____
 OPC _____
 MMS _____
 SEC _____
 OTH _____

DOCUMENT NUMBER-DATE
10925 OCT-9 8
 FPSO-CLERK