

1.) CORPORATION NAME:

**Tellabs Vienna, Inc.**

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1534991**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1415 WEST DIEHL ROAD

CITY/ST/ZIP: NAPERVILLE, IL 60563-2349

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: JAMES M SHEEHAN TITLE: EVP/GC/SEC ADDRESS: 1415 WEST DIEHL RD CITY/ST/ZIP/CO: NAPERVILLE, IL 60563-2349</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JOHN P CANNOVA TITLE: ASST SECRETARY ADDRESS: 1415 W DIEHL RD CITY/ST/ZIP/CO: NAPERVILLE, IL 60563</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Daniel P Kelly TITLE: PRESIDENT ADDRESS: 1415 West Diehl Road CITY/ST/ZIP/CO: Naperville, IL 60563</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Andrew B Szafran TITLE: VICE PRESIDENT ADDRESS: 1415 West Diehl Road CITY/ST/ZIP/CO: Naperville, IL 60563</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Thomas P Minichiello TITLE: VICE PRESIDENT ADDRESS: 1415 West Diehl Road CITY/ST/ZIP/CO: Naperville, IL 60563</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Blair S Olexa TITLE: TREASURER ADDRESS: 1415 West Diehl Road CITY/ST/ZIP/CO: Naperville, IL 60563</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: Keith A Reed TITLE: Controller ADDRESS: 1415 West Diehl Road CITY/ST/ZIP/CO: Naperville, IL 60563	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JOHN P CANNOVA	JOHN P CANNOVA, ASST	1/28/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.