SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL				
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			01 00			npany / lot 01 1040				
1. Name and Addres Senate Limite				uer Name <b>and</b> Tick NUS NETWC				ationship of Report k all applicable) Director	0 (	s) to Issuer .0% Owner
(Last) PO BOX 71082	(First)	(Middle)		te of Earliest Transa 1/2007	action (Month/	Day/Year)		Officer (give title below)		Other (specify pelow)
(Street) DUBAI (City)	C0 (State)	(Zip)	4. If A	mendment, Date o	f Original Filec	l (Month/Day/Year)	6. Indi Line) X	ividual or Joint/Grou Form filed by O Form filed by M Person	ne Reporting	J Person
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
	(In a tr. 2)					C. Ourmanak	in 7 Nature of			

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	07/11/2007		Р		35,270	A	\$8.39	37,444,463	Ι	See Footnote <sup>(1)</sup>

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		Transaction of Code (Instr. Derivative			Expiration Date (Month/Day/Year)		7. Title Amour Securi Underi Deriva Securi and 4)	nt of ties ying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

1. Name and Address of Reporting Person $^{*}$	
Sonato Limited Trustee	

<u>Senate Linnieu</u> ,	Trustee	
(Last)	(First)	(Middle)
PO BOX 71082		
(Street)		
DUBAI	C0	
(City)	(State)	(Zip)

# 1. Name and Address of Reporting Person\* <u>LEGATUM GLOBAL INVESTMENT LTD</u>

(Last) PO BOX 71082	(First)	(Middle)
(Street) DUBAI	C0	
(City)	(State)	(Zip)
1. Name and Address of LEGATUM GL	Reporting Person <sup>*</sup>	<u>GS LTD</u>
(Last) PO BOX 71082	(First)	(Middle)

(Street)

DUBAI	C0	
(City)	(State)	(Zip)
1. Name and Address of LEGATUM CA		
(Last) PO BOX 71082	(First)	(Middle)
(Street) DUBAI	C0	
(City)	(State)	(Zip)
1. Name and Address of GALAHAD SE	f Reporting Person <sup>*</sup> CURITIES LTD	
(Last) PO BOX 71082	(First)	(Middle)
(Street) DUBAI	C0	

#### Explanation of Responses:

1. These shares are owned directly by Galahad Securities Limited, which is a wholly owned subsidiary of Legatum Capital Limited, which is a wholly owned subsidiary of Legatum Global Holdings Limited, which is a wholly owned subsidiary of Senate Limited, acting on behalf of that certain trust formed under the laws of The Cayman Islands as of 1 July 1996. Legatum Capital Limited, Legatum Global Holdings Limited, Legatum Global Investment Limited and Senate Limited are indirect beneficial owners of the reported securities.

> /s/ Olivia A. Morris, Director 07/13/2007 of Senate Limited Date

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.