	FLORIDA PAY TELE		JUL 0 2 1998 RTIFICATE A	ATTACHMENT B
	LEGAL NAME OF THE AF	PPLICANT PU	blics11 Tele	communistion_
	NAME UNDER WHICH TH PURLICALL Telecomm			NESS
	ADDRESS OF THE APPLI	CANT(S)		
	STREET_24 DORSET	COURT		
	CITY SOMERSET			
	STATE & ZIP CODE	, 08873		
2	TYPE OF ORGANIZATION	(CHECK ONE	) √	
	A. INDIVIDUAL DOING B OWN NAME:	USINESS UND	ER HIS/HER	[ ]
	DOCUMENTATION: No oth	ner documentat	on needed.	
	B. PARTNERSHIP:			1 1
	DOCUMENTATION: Attach name and address of all par		artnership agreer	nent, and a list with the
	C. CORPORATION:			4
000	CUMENTATION: Attach pro Florida Secretary of State's from the Florida Secretary of Florida and provide name a	Office. If incorp	orated outside o	f Florida, attach proof rity to operate in
	NAME CORPORATE	CREATIONS	EntreARise	1 The
	ADDRESS 4521 PG			
	Palm Beach	GARLEAS	H 33418	>

FORM PUBLIC SERVICE COMMISSION/CMU 32 (R3-93) REQUIRED BY COMMISSION RULE NO 25-24 511 NCIGENWOO SOMA BOCUMENT NUMBER DATE O BAIDO FM 06942 JUL-2 C

PESE- RECORDS, REPORTING

64 8 W Z W 8 43

9

D. DOING BUSINESS UNDER A FICTITIOUS NAME: ( )

DOCUMENTATION: Attach proof that a fictitious name(s) has been registered with the Florida Secretary of States Office.

5. PROVIDER NAME, TITLE, AND TELEPHONE NUMBER OF THE INDIVIDUAL WHO IS RESPONSIBLE FOR COMMISSION CONTACTS:

NAME:	RICARGO CUMBERBATCH		
TITLE:	ARESIDENT		
PHONE:	(800)752-9191		

6. HAS APPLICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., OR IN THE CASE OF A CLOSELY HELD CORPORATION ANY SHAREHOLDER OF THE APPLICANT EVER BEEN GRANTED OR DENIED A PAY TELEPHONE CERTIFICATE IN THE STATE OF FLORIDA? THIS INCLUDES ACTIVE AND CANCELED PAY TELEPHONE CERTIFICATES.

NO

7. IF THE ANSWER TO QUESTION 6 IS YES, PLEASE EXPLAIN AND LIST THE CERTIFICATE HOLDER AND CERTIFICATE NUMBER.

8 LIST THE STATES IN WHICH THE APPLICANT.

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE.

NEW SERSEY, Pennsyluani A, NEW YORK, MARYLand

FORM PUBLIC SERVICE COMMISSIONCMU 32 (R3-92) RECURED BY COMMISSION RULE NO. 25-24 511

79.42

B. HAS APPLICATIONS PENDING TO BE CERTIFICATED AS A PAY TELEPHONE PROVIDER.

NO

C. HAS BEEN DENIED AUTHORITY TO OPERATE AS A PAY TELEPHONE PROVIDER. EXPLAIN CIRCUMSTANCES.

	1.0				
-		_			

ND

D, HAS HAD REGULATORY PENALTIES IMPOSED FOR VIOLATIONS OF TELECOMMUNICATIONS STATUTES, EXPLAIN CIRCUMSTANCES.

M

9. PLEASE INDICATE IF ANY OFFICERS OF THE CORPORATION, PARTNERSHIP OR INDIVIDUAL APPLICANT HAVE BEEN ADJUDGED BANKRUPT. MENTALLY INCOMPETENT, OR FOUND GUILTY OF ANY FELONY OR OF ANY CRIME, OR WHETHER SUCH ACTIONS MAY RESULT FROM PENDING PROCEEDINGS.

None

FORM PUBLIC SERVICE COMMISSION/CMU 32 (R3-9)) REQUIRED BY COMMISSION RULE NO: 25-24 511

10. PLEASE CHECK ✓ THE SERVICES THAT WILL BE PROVIDED.

LOCAL	۵
LONG DISTANCE	۵
COIN	e contraction of the second se
CALLING CARD	۵
CREDIT CARD	
OTHER, DESCRIBE	or PRE-Paid Cellular / Calling Carlos

12. HOW DOES THE APPLICANT INTEND TO SERVICE AND MAINTAIN EACH PAYPHONE? √

0
8
8
0

13. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL PROVIDE ACCESS TO ALL LOCALLY AVAILABLE LONG DISTANCE CARRIERS VIA IOXXX+0, 950-XXXX, AND 1-800? (See Rule 25-24.515(6), F.A.C.

Yes

1

FORM PUBLIC SERVICE COMMISSION/CMU 32 (R3-92) REQUIRED BY COMMISSION RULE NO 25-24 511

14. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL CONFORM TO SUBSECTIONS 4.29.2 - 4.29.4 and - 4.29.8 OF THE AMERICAN NATIONAL STANDARD SPECIFICATIONS FOR MAKING BUILDINGS AND FACILITIES / CCESSIBLE AND USABLE BY PHYSICALLY HANDICAPPED PEOPLE (ATTACHMENT F ANSI STANDARDS) (See Rule 25-24.515(14), F.A.C.)

Yes

FORM PUBLIC SERVICE COMMISSION/CMU 32 (R3-93) RECURED BY COMMISSION RULE NO. 25-24 511

I. THE UNDERSIGNED OWNER OR OFFICER OF THE ABOVE NAMED ENTITY. HAVE READ THE FOREGOING AND DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF. THE INFORMATION IS A TRUE AND CORRECT STATEMENT, I AM AWARE THAT PURSUANT TO S. 837.06, FLORIDA STATUTE. WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND DEGREE. I WILL COMPLY WITH ALL CURRENT AND FUTURE COMMISSION REQUIREMENTS REGARDING THE PAY TELEPHONE SERVICE. I UNDERSTAND THAT A NON-REFUNDABLE APPLICATION FEE OF \$100 MUST ACCOMPANY THE APPLICATION. ALSO I UNDERSTAND THAT I AM REQUIRED TO PAY A REGULATORY ASSESSMENT FEE (MINIMUM \$50,00 PER CALENDAR YEAR), FILE AN ANNUAL PAY TELEPHONE SERVICE REPORT, AND PAY GROSS RECEIPTS TAX. FURTHERMORE LAGREE TO KEEP THE COMMISSION ADVISED OF ANY CHANGES IN THE NAMES OR ADDRESSES LISTED ABOVE WITHIN TEN (10) DAYS OF THE CHANGE.

(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: 6/5/98

FORM PUBLIC SERVICE COMMISSION/CMU 32 (R3-83) REGURED BY COMMISSION RULE NO. 25-24-511



Applicant Publicall Telecommunications Inc.

I acknowledge receipt and understanding of the Florida Public Service Commission's Rules and Requirements relating to my provision of Pay Telephone Service.

Signature:	Award Curled	
Title:	APESidenT	
Date:	6/5/98	

### THIS MUST BE COMPLETED AND RETURNED WITH THE APPLICATION BEFORE THE CERTIFICATION PROCESS BEGINS. FAILURE TO DO SO WILL RESULT IN A DELAY OF THE CERTIFICATE BEING ISSUED.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 10, 1998

PUBLICALL TELECOMMUNICATIONS INC. 24 DORSET COURT SOMERSET, NJ 06673

Qualification documents for PUBLICALL TELECOMMUNICATIONS INC. were filed on June 9, 1998 and assigned document number F98000003263. Please refer to this number whenever corresponding with this office.

Your corporation is now qualified and authorized to transact business in Florida as of the file date.

This document was electronically received and filed under FAX audit number H96000010755.

A corporation annual report will be due this office between January 1 and May 1 of the year following the calendar year of the file date. A Federal Employer Identification (FEI) number will be required before this report can be filed. If you do not already have an FEI number, please apply NOW with the Internal Revenue by calling 1-800-829-3676 and requesting form SS-4.

Please be aware if the corporate address changes, it is the responsibility of the corporation to notify this office.

Should you have any questions regarding this matter, please telephone (850) 487-6091, the Foreign Qualification/Tax Lien Section.

Michael Mays Document Specialist Division of Corporations

Letter Number: 998A00032502

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

# IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

### 1 Publicall Telecommunications Inc.

(Name of corporation: must include the word "INCORPORATED", "COMPANY," "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2 Delaware

(State or country under the law of which it is incorporated)

3 22-3511691

(FEI number, if applicable)

4. April 11, 1997

(Date of Incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

 upon filing this application (Date first transacted business in Florida. (See Section 607.1501, 607.1502, and 817.155, F.S.)

7. 24 Dorset Court

Somerset, NJ 08873

(Current mailing address)

8. Purpose of corporation to be carried out in Florida: all activities permitted under applicable law.

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Corporate Creations Enterprises Inc. 4521 PGA Boulevard #211 Palm Beach Gardens, FL 33418

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporate Creations Enterprises Inc. Luis A. Uriarte, Vice President

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

American Incorporators Ltd. 1220 North Market Street, Suite 606 Wilmington DE 19801 302-421-5752

By:

H98000010755

### H98000010755



### A. DIRECTORS

Ricardo Cumberbatch 24 Dorset Court Somerset NJ 08873

Jacqueline Cumberbatch 24 Dorset Court Somerset NJ 08873

### **B. OFFICERS**

PRESIDENT Ricardo Cumberbatch 24 Dorset Court Somerset NJ 08873

SECRETARY Ricardo Cumberbatch 24 Dorset Court Somerset NJ 08873

TREASURER Jacqueline Cumberbatch 24 Dorset Court Somerset NJ 08873

13. Signature of an officer listed in item 12:

By:\_

Ricardo Cumberbatch, President by L.A. Uriarte as attorney-in-fact

Date: 6/9/98

American Incorporators Ltd. 1220 North Market Street, Suite 606 Wilmington DE 19801 302-421-5752



State of Delaware Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PUBLICALL TELECOMMUNICATIONS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF JUNE, A.D. 1998.



Edward J. Freel, Secretary of Stat28132

AUTHENTICATION. DATE:

06-09-98 981221670

2739601 8300 981221670

PAGE 1

	DEPOSIT D 8 0 3 #	JUL 0 2 1998	ATTACHMENT B
	FLORIDA PAY TELEPHONE CE	RTIFICATE AP	PLICATION
	LEGAL NAME OF THE APPLICANT $\underline{P}$	ublics11 Telecor	haunistion
	2. NAME UNDER WHICH THE APPLICAN PURLICALI Telecommunications		SS
	3. ADDRESS OF THE APPLICANT(S) STREET 14 DORSET COURT		
	CITY <u>SOMERSET</u> STATE & ZIP CODE NJ 08873	3	
	4. TYPE OF ORGANIZATION (CHECK ON A. INDIVIDUAL DOING BUSINESS UN	E) √	( )
	OWN NAME: DOCUMENTATION: No other documenta B. PARTNERSHIP:		1
	DOCUMENTATION: Attach a copy of the partners and address of all partners.	partnership agreemer	nt, and a list with the
	C. CORPORATION:		4
	DOCUMENTATION: Attach proof that articles	of incorporation hav	e beenfiled with the
PUBLICALL	TELECOMMUNICATIONS, INC. 34 DORSET COURT SOMERSET NJ DR873	CORESTATES 120 CLEAR GROVE LANE SOMERSET, NJ 08873	1498
			CHECK NUMBER
PAY			001498
65-65-55F	One Hundred and 00/100 Dollars	DATE	AMOUNT
- 2	FLORIDA PSC 2540 SHUMARD OAK BOULEVARD FALLAHASSEE, FL 32399	6/24/98	\$*100.00

Ruor Competer