

980548 - TX

1. This is an application for (check one):
- | | | |
|--|---------|-------------|
| | DEPOSIT | DATE |
| <input checked="" type="checkbox"/> Original authority (new company) | D760 | APR 22 1998 |
- () Approval of transfer (to another certificated company)
Example, a certificated company purchases an existing company and desires to retain the original certificate authority.
- () Approval of assignment of existing certificate (to a noncertificated company)
Example, a non-certificated company purchases an existing company and desires to retain the certificate of authority rather than apply for a new certificate.
- () Approval for transfer of control (to another certificated company)
Example, a company purchases 51% of a certificated company. The Commission must approve the new controlling entity.

2. Name of applicant: 2001 Telecommunications Inc.

3. A. National mailing address including street name, number, post office box, city, state, zip code, and phone number. 5373 North Dixie Highway
Oakland Park Florida. 33334

B. Florida mailing address including street name, number, post office box, city, state, zip code, and phone number.
954 771 0111 5373 North Dixie Highway
Oakland Park Florida 33334

C. Physical address of alternative local exchange service in Florida including street name, number, post office box, city, zip code and phone number. 5373 North Dixie Highway
Oakland Park Florida 33334 954 771 0111

4. Structure of organization:

Individual
 Foreign Corporation
 General Partnership
 Joint Venture

Corporation
 Foreign Partnership
 Limited Partnership
 Other, Please explain _____

5. If incorporated, please provide proof from the Florida Secretary of State that the applicant has authority to operate in Florida.

Corporate charter number: 65-0065826

6. Name under which the applicant will do business (d/b/a):

2001 Telecommunications Inc

7. If applicable, please provide proof of fictitious name (d/b/a) registration.

Fictitious name registration number: _____

8. If applicant is an individual, partnership, or joint venture, please give name, title and address of each legal entity.

9. State whether any of the officers, directors, or any of the ten largest stockholders have previously been adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings. If so, please explain.

N/A no such action ever taken

10. Please provide the name, title, address, telephone number, internet address, and facsimile number for the person serving as ongoing liaison with the Commission, and if different, the liaison responsible for this application.

John Korman / 5373 North Dixie Highway
Oakland Park Florida 33334
954 771 0111 1800 511 2001

11. Please list other states in which the applicant is currently providing or has applied to provide local exchange or alternative local exchange service.

N/A

12. Has the applicant been denied certification in any other state? If so, please list the state and reason for denial.

No N/A

13. Have penalties been imposed against the applicant in any other state? If so, please list the state and reason for penalty.

No N/A

14. Please indicate how a customer can file a service complaint with your company.

Customer Service Center which is Operated by 2001 Telecommunications Inc 24/7 via: 800 #

15. Please provide all available documentation demonstrating that the applicant has the following capabilities to provide alternative local exchange service in Florida.

A. Financial capability.

Regarding the showing of financial capability, the following applies:

The application should contain the applicant's financial statements for the most recent 3 years, including:

1. the balance sheet ✓
2. income statement ✓
3. statement of retained earnings. ✓

Further, a written explanation, which can include supporting documentation, regarding the following should be provided to show financial capability.

1. Please provide documentation that the applicant has sufficient financial capability to provide the requested service in the geographic area proposed to be served.

2. Please provide documentation that the applicant has sufficient financial capability to maintain the requested service.

3. Please provide documentation that the applicant has sufficient financial capability to meet its lease or ownership obligations.

NOTE: This documentation may include, but is not limited to, financial statements, a projected profit and loss statement, credit references, credit bureau reports, and descriptions of business relationships with financial institutions.

If available, the financial statements should be audited financial statements.

If the applicant does not have audited financial statements, it shall be so stated. The unaudited financial statements should then be signed by the applicant's chief executive officer and chief financial officer. The signatures should attest that the financial statements are true and correct.

B. Managerial capability.

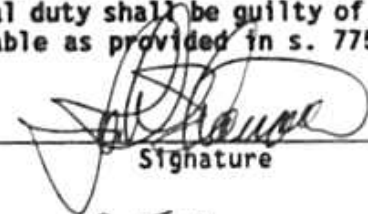
C. Technical capability.

AFFIDAVIT

By my signature below, I, the undersigned officer, attest to the accuracy of the information contained in this application and attached documents and that the applicant has the technical expertise, managerial ability, and financial capability to provide alternative local exchange service in the State of Florida. I have read the foregoing and declare that to the best of my knowledge and belief, the information is true and correct. I attest that I have the authority to sign on behalf of my company and agree to comply, now and in the future, with all applicable Commission rules and orders.

Further, I am aware that pursuant to Chapter 837.06, Florida Statutes, "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, punishable as provided in s. 775.082 and s. 775.083".

Official:



Signature

4/13/98
Date

Title:

CEO

954 771-0111
Telephone Number

Address:

5373 W Dixie Highway
Oakland Park Florida 33334

FLORIDA PUBLIC SERVICE COMMISSION
CAPITAL CIRCLE OFFICE CENTER - 2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FLORIDA 32399-0850

APPLICATION FORM
for

AUTHORITY TO PROVIDE ALTERNATIVE LOCAL EXCHANGE SERVICE
WITHIN THE STATE OF FLORIDA

9/25/88-IX

INSTRUCTIONS

1. This form is used for an original application for a certificate and for approval of sale, assignment or transfer of an existing alternative local exchange certificate. In case of a sale, assignment or transfer, the information provided shall be for the purchaser, assignee or transferee.
2. Respond to each item requested in the application and appendices. If an item is not applicable, please explain why.
3. Use a separate sheet for each answer which will not fit the allotted space.
4. If you have questions about completing the form, contact:

Florida Public Service Commission
Division of Communications, Certification & Compliance Section
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0866
(904) 413-6600

5. Once completed, submit the original and six (6) copies of this form along with a non-refundable application fee of \$250 made payable to the Florida Public Service Commission at the above address.

FORM PSC/CMU 8 (07/95)
Required by Chapter 364.337 F.S.

RECEIVED
APR 22 10 18 AM '98
ADMINISTRATION
MAIL ROOM

RECEIVED

APR 22 10 18 AM '98

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APR 22 1998

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Oakland Park Florida. 33334

B. Florida mailing address including street name, number, post office box, city, state, zip code, and phone number.

954 771 0111

5373 North Dixie Highway
Oakland Park Florida 33334



2001 TELECOMMUNICATIONS, INC.

6373 N. DIXIE HIGHWAY
OAKLAND PARK, FLORIDA 33334

2829

63 1306/670

PAY TO THE ORDER OF FLORIDA Public Service Commission \$ 250 ⁰⁰/₁₀₀

TWO HUNDRED FIFTY DOLLARS

GATEWAY AMERICAN BANK OF FLORIDA
1451 N.W. 62ND STREET STE. 212
FT. LAUDERDALE, FLORIDA 33309

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