

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

960885-TL

DEPOSIT TREAS. REC. DATE

1. LEGAL NAME OF THE APPLICANT

D351 ~~08-10~~ AUG 05 '96

JEAN T. KACHIK

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

KaCi COMMUNICATIONS, INC

3. ADDRESS OF THE APPLICANT(S)

STREET 8600 GATE HOUSE RD.

CITY PLANTATION

STATE & ZIP FL ~~330~~ 33324

4. TYPE OF ORGANIZATION (CHECK ONE)

A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER:
OWN NAME.

DOCUMENTATION: No other documentation needed.

B. PARTNERSHIP:

DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the name and address of all partners.

C. CORPORATION:

DOCUMENTATION: Attach proof that articles of incorporation have been filed with the Florida Secretary of State's Office. If incorporated outside of Florida, attach proof from the Florida Secretary of State that applicant has authority to operate in Florida and provide name and address of Florida Registered Agent.

NAME KaCi COMMUNICATIONS, INC

ADDRESS 16790 NW 12TH ST
PEMBROKE PINES, FL 33028

D. DOING BUSINESS UNDER A FICTITIOUS NAME:

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

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

NAME: WILLIAM J. CESCO, SR.

TITLE: MANAGER

PHONE: 954-431-1421 or 1-800-780-1394

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 CANCELLED 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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

10. PLEASE CHECK THE SERVICES THAT WILL BE PROVIDED:

LOCAL	<input checked="" type="checkbox"/>
LONG DISTANCE	<input checked="" type="checkbox"/>
COIN	<input checked="" type="checkbox"/>
CALLING CARD	<input checked="" type="checkbox"/>
CREDIT CARD	<input checked="" type="checkbox"/>
OTHER, DESCRIBE	<input type="checkbox"/>

11. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR: 100

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

PERSONALLY	<input type="checkbox"/>
FULL-TIME TECHNICIAN	<input checked="" type="checkbox"/>
PART-TIME TECHNICIAN	<input type="checkbox"/>
SERVICE/REPAIR/MAINTENANCE CONTRACT	<input type="checkbox"/>
OTHER, DESCRIBE	<input type="checkbox"/>

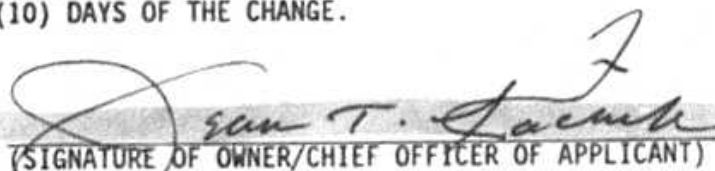
13. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL PROVIDE ACCESS TO ALL LOCALLY AVAILABLE LONG DISTANCE CARRIERS VIA IOXXX+0, 950-XXXX, AND 1-800? (See Rule 25-24.515(6), F.A.C.)

YES.

14. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL CONFORM TO SUBSECTIONS 4.29.2 - 4.29.4 and 4.29.7 - 4.29.8 OF THE AMERICAN NATIONAL STANDARDS SPECIFICATIONS FOR MAKING BUILDINGS AND FACILITIES ACCESSIBLE AND USABLE BY PHYSICALLY HANDICAPPED PEOPLE (ATTACHMENT F)? (See Rule 25-24.515(14), F.A.C.)

YES.

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, I AGREE 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: 8/1/96

APPLICANT ACKNOWLEDGEMENT CARD

Applicant JEAN T. KACHIK

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

Signature *Jean T. Kachik*

Title PRESIDENT

Date 8/1/96

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.

PLEASE READ!!!

ATTACHMENT B

FLORIDA PUBLIC SERVICE COMMISSION

Application Form

FOR

Certificate to Provide Pay Telephone Service

Within the State of Florida

- A. This form is used for an original application for a certificate to provide pay telephone service within the State of Florida.
- B. A \$100 non-refundable application fee along with the enclosed Applicant Acknowledgement Card must be completed and accompany the application before processing will begin.
- C. If the answer to question #2 is a Fictitious Name or Corporate Name, documentation from the Secretary of States office must accompany your application.
- D. Once a certificate has been granted, regulatory assessment fees will be due for that calendar year regardless of whether or not pay telephones have been installed.
- E. When completing the application, respond to each item. If an item is not applicable, explain why. Failure to respond to any item will result in the application being returned and a delay in the application process.
- F. Use a separate sheet for each answer which will not fit the allotted space.
- G. If you have any questions about completing the form, contact the Certificate Section at (904) 413-6556.
- H. Once completed, the original plus two (2) copies of this form, along with \$100 application fee, are to be submitted to:

Florida Public Service Commission
Gunter Building, 2540 Shumard Oak Boulevard
Capital Circle Office Center
Tallahassee, FL 32399-0850

ARTICLES OF INCORPORATION
OF
KaCi COMMUNICATIONS, INC.

RECEIVED

JUL 31 1996

RECEIVED

P96000063972

The undersigned subscriber to these Articles of Incorporation hereby forms a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

KaCi COMMUNICATIONS, INC.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation, including but not limited to Purchase and Sale of real estate.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is One Hundred (100) shares of common stock having a par value of \$1.00 per share. The corporation will begin business with One Hundred dollars (\$100.00).

ARTICLE IV. ADDRESS

The principal office and mailing address of the Corporation is 8600 Gatehouse Road, Plantation, Florida 33324.

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MAIL ROOM
96 AUG -2 AM 9:59

ARTICLE V. REGISTERED OFFICE

The street address of the initial registered office of the corporation shall be 10081 Pines Boulevard, Suite C, Pembroke Pines, Florida 33024, and the name of the initial registered agent of the corporation at the aforesaid address is Arnold M. Straus, Jr.

ARTICLE VI. TERM OF EXISTENCE

This Corporation shall commence on the filing of these Articles with the Secretary of State, and it shall exist perpetually.

ARTICLE VII. PREEMPTIVE RIGHTS

Every shareholder, shall have the right to purchase his pro rata share of any new stock issued by Corporation at the price at which it is offered to others.

ARTICLE VIII. SPECIAL PROVISION

The Corporation expressly elects not to be governed by Section 607.0901 of the Florida Business Corporation Act, as amended from time to time, relating to affiliated transactions.

The Corporation expressly elects not to be governed by Section 607.0102 of the Florida Business Corporation Act as amended from time to time, relating to control share acquisitions.

ARTICLE IX. DIRECTORS

This corporation shall have one director initially and the number of directors may be increased or diminished from time to time as provided in the By-Laws, but shall never be less than one. The name and street address of the initial member of the Board of Directors is:

JEAN KACHIK

8600 Gatehouse Road
Plantation, Florida 33324

ARTICLE X. OFFICERS

The name and address of the initial officers of the corporation who shall hold office for the first year of the corporation, or until successors are elected or appointed

is:

President/Secretary
JEAN KACHIK

8600 Gatehouse Road
Plantation, Florida 33324

ARTICLE XI. SUBSCRIBER

The name and street address of the subscriber of these Articles of Incorporation

is:

JEAN KACHIK

8600 Gatehouse Road
Plantation, Florida 33324


IN WITNESS WHEREOF, the undersigned has hereunto set his hand seal on this 29th day of July, 1996.

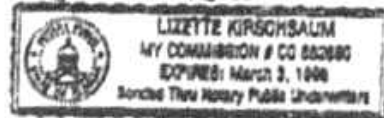

JEAN KACHIK

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 29th day of July, 1996 by JEAN KACHIK who is known to me.


NOTARY PUBLIC, State of Florida
My Commission Expires:
Lizette Kirschbaum



960885-TC

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

DEPOSIT TREAS. REC. DATE

D351 ~~100~~ 100 AUG 05 '96

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JEAN T. KACHIK

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NAME KaCi COMMUNICATIONS, INC
ADDRESS 16790 NW 12TH ST

KaCi Communications, Inc.
16790 NW 12th Street
Pembroke Pines, Fl 33028
(954) 431-1421

992
83-243/670

August 1 1996

Pay to the order of Public Service Commission \$100.00****

One Hundred and no cents ----- Dollars



DOCUMENT NUMBER-DATE

08160 AUG-59

For Fee for Application

William J. ...
SECRETARY OF REVENUE