INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: 214 APPLICATION

Attention: Ms FRANCHESCA NGUYEN

1. App	olicant				
	Name:	DATEK SYSTEMS INC.	Phone Number:	408-451-9666	
	DBA Name:		Fax Number:	408-451-9307	
	Street:	240 E. GISH ROAD	E–Mail:	info@buysellphone.com	
	City:	SAN JOSE	State:	CA	
	Country:	USA	Zipcode:	95112 –	

2. Contact							
	Name:	FRANCHESCA NGUYEN	Phone Number:	408-451-9666			
	Company:	DATEK SYSTEMS INC.	Fax Number:	408-451-9307			
	Street:	240 E. GISH RD.	E-Mail:	fran@wifi2voice.com			
	City:	SAN JOSE	State:	CA			
	<u> </u>						
	Country:	USA	Zipcode:	95112 –			
	Attention:	FRANCHESCA NGUYEN	Relationship:	Other			
3. Place of	Incorporation	n of Applicant SAN JOSE, CA	LIFORNIA				
4. Other C	ompany(ies) a	and Place(s) of Incorporation					
5 Service	Type(s) (chec	k all that apply)					
	• • • • • • • • • • • • • • • • • • • •	d Global Facilities—Based Authori	ty (Section 63.18(e)(1))				
	Individual Facilities—Based Service (Section 63.18(e)(3))						
	Individual Switched Resale Service (Section 63.18(e)(3))						
	Individual Facilities–Based and Resale Service (Section 63.18(e)(3))						
Swi	tched Service	s over Private Lines (ISR) (Section	n 63.16 and/or 63.18 (e)(3))				
Inm	Inmarsat and Mobile Satellite Service (Section 63.18(e)(3))						
Ove	erseas Cable C	Construction (Section 63.18(e)(3))					
Indi	vidual Non-I	nterconnected Private Line Resale	Service (Section 63.18(e)(3))				

Other (Section 63.18(e)(3))

	d with this application? and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
Governmental E	Entity Noncommercial educational licensee
Other(please ex	plain):
6b. Fee Classification	n CUT – Section 214 Authority
7. Destination Coun "Countries X, Y, and	try(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or I Z only".) ALL INTERNATIONAL POINTS
All International Poi	ion of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to ints Except Country X) escription does not appear in this box, please go to the end of the form to view it in its entirety.)
	Application for authority to operate as a facilities-based carrier pursuant to the terms and conditions of Section 63.18 (e)(1), of the Commission's Rules 47 C.F.R. and as a resale carrier pursuant to the terms and conditions of Section 63.18 (e)(2) of the Commission's Rule.
	nt request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in ement of how the application qualifies for streamlined processing.
10. If applying for a Attachment 1.	uthority to provide switched services over private lines pursuant to Section 63.16, provide the required showing in

Applicant c	ertifies that	its responses	to questions	11 through 1'	7 are true:

15. In Attachment 2, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.

represent certifies that its responses to questions in an ough 17 are true.		
11. If the applicant is a foreign carrier, or is affiliated (as defined in 47 C.F.R. Section 63.09(e)) with a foreign carrier, provide in Attachment 1 the information and certifications required by Section 63.18(i) through (m).		
12. Does the applicant seek authority to provide service to any destination described in paragraphs (1) through (4) of Section 63.18(j)? If yes, list those destinations in Attachment 1 as a response to question 12.	O Yes	No
13. Does the applicant seek authority to provide service to any destinations other than those listed in response to question 12 where it has an affiliation with a foreign carrier? If yes, list those destinations in Attachment 1 as a response to question 13.	O Yes	No
14. [Section 63.18(h)] In Attachment 2, provide the name, address, citizenship and principal business of the applicant's ten percent or greater direct and indirect shareholders or other equity holders, and identify any interlocking directorates.		

16. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.	•	Yes	0	No
17. By checking Yes, the applicant certifies that it has not agreed to accept special concessions directly or indirectly from a foreign carrier with respect to any U.S. international route where the foreign carrier possesses sufficient market power on the foreign end of the route to affect competition adversely in the U.S. market and will not enter into such agreements in the future.	•	Yes	0	No

CERTIFICATION

18. Typed Name of Person Signing DAVE NGUYEN	l	19. Title of Person Signing PRESIDENT				
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).						
20. 1: respond to # 9, 11	2: respond # 14, 15	3:				

FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

The public reporting for this collection of information is estimated to average 1-6,056 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD–PERM, Paperwork Reduction Project (3060–0686), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to jboley@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS ADDRESS.

Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060–0686.

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104–13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

8. Caption (description of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to All International Points Except Country X)

Application for authority to operate as a facilities-based carrier pursuant to the terms and conditions of Section 63.18 (e)(1), of the Commission's Rules 47 C.F.R. and as a resale carrier pursuant to the terms and conditions of Section 63.18 (e)(2) of the Commission's Rule. 47 C.F.R. to all international points as authorized by the Commission. 47 C.F.R.