INTERNATIONAL SECTION 214 APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: Application for international section 214

| ITSI America, Inc. | Phone Number: Fax Number: | 305–418–9833 x1011 305–418–9838 |
|-------------------------|---------------------------|------------------------------------|
| | Fax Number: | 305–418–9838 |
| | | |
| 7270 NW 12 St Suite 320 | E-Mail: | FrankP@itsintegrators.com |
| Miami | State: | FL |
| USA | Zipcode: | 33126 – |
| Mr Frank E Polo | | |
| | USA | USA Zipcode: |

| 2. Contact | | | | | |
|---|---------------------------------------|-------------------------------|---------------------------|--|--|
| Name: | Frank Polo | Phone Number: | 3054189833 | | |
| Company: | ITSI America, Inc. | Fax Number: | 3054189838 | | |
| Street: | 7270 NW 12 St Suite 320 | E-Mail: | Frankp@itsintegrators.com | | |
| City: | Miami | State: | FL | | |
| Country: | USA | Zipcode: | 33126 – | | |
| Attention: | Frank Polo | Relationship: | Same | | |
| | | | | | |
| | | | | | |
| 3. Place of Incorporation | n of Applicant Florida | | | | |
| 4. Other Company(ies) and Place(s) of Incorporation | | | | | |
| | | | | | |
| 5. Service Type(s) (chec | | | | | |
| | d Global Facilities–Based Author | | | | |
| Global or Limite | d Global Resale Authority (Section 1) | ion 63.18(e)(2)) | | | |
| Individual Facilit | ties-Based Service (Section 63.1 | 8(e)(3)) | | | |
| Individual Switch | hed Resale Service (Section 63.1 | 8(e)(3)) | | | |
| Individual Facilit | ties-Based and Resale Service (S | ection 63.18(e)(3)) | | | |
| | es over Private Lines (ISR) (Secti | on 63.16 and/or 63.18 (e)(3)) | | | |
| | bile Satellite Service (Section 63 | .18(e)(3)) | | | |
| Overseas Cable (| Construction (Section 63.18(e)(3) |)) | | | |
| Individual Non–Interconnected Private Line Resale Service (Section 63.18(e)(3)) | | | | | |
| Other (Section 63.18(e)(3)) | | | | | |

| 6a. Is a fee submitted with this application? a If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). | |
|--|---|
| Governmental Entity Noncommercial educational licensee | |
| Other(please explain): | |
| 6b. Fee Classification CUT – Section 214 Authority | |
| 7. Destination Country(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or "Countries X, Y, and Z only".) All international Points | |
| | |
| 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) (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.) | |
| Application for Authority to Provide International Facilities-Based and Resold Services to All International Points | |
| 9. Does the applicant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in Attachment 1 a statement of how the application qualifies for streamlined processing. 10. If applying for authority to provide switched services over private lines pursuant to Section 63.16, provide the required showing in Attachment 1. | _ |

| 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 | ٥ | No |

CERTIFICATION

| 18. Typed Name of Person Signing Frank Polo | | 19. Title of Person Sig President | gning | |
|---|------------------|--------------------------------------|----------------------|--|
| WILLFUL FALSE STATEMENTS MAD (U.S. Code, Title 18, Section 10 (U.S. Code, Title 47, Section 3 | 001), AND/OR REV | OCATION OF ANY S | TATION AUTHORIZATION | |
| 20. 1: | 2: | | 3: | |

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