INTERNATIONAL SECTION 214 APPLICATION FCC FORM 214 FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: International Section 214 Application for Downplay

1. Applicant			
Name	e: Downplay, Inc.	Phone Number:	714–241–4660
DBA Name		Fax Number:	714–241–4661
Stree	t: 3070 Bristol Street	, Suite 160 E–Mail:	jae@kimandkang.net
City:	Costa Mesa	State:	CA
Cour	ntry: USA	Zipcode:	92626 –
Atter	ntion: Mr. Jae Y Kang		

2. Contac	·t			
2. Contac				
	Name:	Jae Y. Kang	Phone Number:	858-292-2550
	Company:	Kim & Kang	Fax Number:	858-292-2551
	Street:	7675 Dagget Street Suite 350	E–Mail:	jae@kimandkang.net
	City:	San Diego	State:	CA
	Country:	USA	Zipcode:	92111 –
	Attention:		Relationship:	Legal Counsel
3. Place of	of Incorporation	n of Applicant Delaware		
4. Other	Company(ies)	and Place(s) of Incorporation		
5 Service	Type(s) (chec	ck all that apply)		
	• • • • • • • • • • • • • • • • • • • •	d Global Facilities—Based Authorit	y (Section 63.18(e)(1))	
		d Global Resale Authority (Section		
	dividual Facilit	ties-Based Service (Section 63.18(e)(3))	
Inc	dividual Switch	hed Resale Service (Section 63.18(e)(3))	
Inc	dividual Facilit	ties-Based and Resale Service (Sec	etion 63.18(e)(3))	
Sv	vitched Service	es over Private Lines (ISR) (Section	n 63.16 and/or 63.18 (e)(3))	
In	marsat and Mo	bile Satellite Service (Section 63.1	8(e)(3))	
	verseas Cable (Construction (Section 63.18(e)(3))		
Inc	dividual Non–l	Interconnected Private Line Resale	Service (Section 63.18(e)(3))	
Ot	her (Section 63	3.18(e)(3))		

	ed with this application? e and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).
Governmental l	Entity Noncommercial educational licensee
Other(please ex	xplain):
6b. Fee Classification	on CUT – Section 214 Authority
7. Destination Cour "Countries X, Y, and	ntry(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or d Z only".) All international points
All International Po	tion of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to bints Except Country X) description does not appear in this box, please go to the end of the form to view it in its entirety.)
	The Applicant is applying for authority to operate as a resale carrier pursuant to the terms and conditions of Section 63.18 (e)(2) of the Commission's Rules. The Applicant requests authority to serve all countries permitted under a grant of global authority.
	ant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in tement of how the application qualifies for streamlined processing.
10. If applying for a Attachment 1.	authority 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	٥	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

		19. Title of Person Signing President		
· · · · · · · · · · · · · · · · · · ·	MADE ON THIS FORM AR on 1001), AND/OR REVOC. ion 312(a)(1)), AND/OR FO	ATION OF ANY STA	ΓΙΟΝ AUTHORIZATION	
20. 1: ATTACHMENT 1	2: ATTACHMENT	2 3:		

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