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: Cytel, Inc. – International Section 214 Application

1. Applica	nt			
	Name:	Cytel, Inc.	Phone Number:	954–968–1198
	DBA Name:		Fax Number:	
	Street:	2700 W. Atlantic Blvd Ste 280	E-Mail:	corporate@cytelcomm.com
	City:	Pompano Beach	State:	FL
	Country:	USA	Zipcode:	33069 – 5719
	Attention:	Carmen Asorey		

2. Contact							
Name:	Charles Helein	Phone Number:	(703) 714–1301				
Company:	Helein & Marashlian, LLC	Fax Number:	(703) 714–1300				
Street:	1420 Spring Hill Road	E-Mail:	chh@commlawgroup.com				
	Suite 205						
City:	McLean	State:	VA				
Country:	USA	Zipcode:	22102 –				
Attention:	Charles H. Helein	Relationship:	Legal Counsel				
3. Place of Incorporation	on of Applicant Nevada						
4. Other Company(ies)	and Place(s) of Incorporation						
5. Service Type(s) (che	5. Service Type(s) (check all that apply)						
• • • • • • • • • • • • • • • • • • • •	ed Global Facilities–Based Authori	ty (Section 63.18(e)(1))					
Global or Limite	ed Global Resale Authority (Section	on 63.18(e)(2))					
Individual Facili	ities-Based Service (Section 63.18	(e)(3))					
Individual Switch	Individual Switched Resale Service (Section 63.18(e)(3))						
Individual Facilities—Based and Resale Service (Section 63.18(e)(3))							
Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))							
Inmarsat and Mobile 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))							

	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).
"	Entity Noncommercial educational licensee
Other(please ex	· ·
Other (picase ex	plant).
6b. Fee Classification	on 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 d Z only".) All International Points
All International Po	ion of authority requested, e.g., Application for Authority to Provide International Facilities—Based and Resold Services to ints Except Country X) lescription does not appear in this box, please go to the end of the form to view it in its entirety.)
	Application for Authority to Porvide International Resold Services to All Authorized International Points
Attachment 1 a stat	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. Sutherity 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

18. Typed Name of Person Signing (Must be Carmen Asorey	e a Corporate Officer)	19. Title of Person Signing President
(U.S. Code, Title 18, S	ection 1001), AND/OR RE	RM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT EVOCATION OF ANY STATION AUTHORIZATION OR FORFEITURE (U.S. Code, Title 47, Section 503).
20. 1: Attachment 1	2: Attachmen	nt 2 3:

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