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: Application for Global or Limited Global Facilities—Based and Resale Authority pursuant to Sections 63.18(e)(1) and (2)

1. Applicant			
Name:	Payfone Inc.	Phone Number:	347–279–2736
DBA Name:		Fax Number:	
Street:	215 Park Avenue S	E-Mail:	product@payfone.com
	Suite 1101		
City:	New York	State:	NY
Country:	USA	Zipcode:	10003 – 1603
Attention:	Mr Ravi Patel		

2. Contact

Name: Raul Magallanes Phone Number: 281 317 1397

Company: The Law Office of Raul Fax Number: 281 271 8085

Magallanes, PLLC

Street: PO Box 1213 E-Mail: raul@rmtelecomlaw.com

City: Friendswood State: TX

Country: USA Zipcode: 77549 -

Attention: Raul Magallanes Relationship: Legal Counsel

3. Place of Incorporation of Applicant Delaware

4. Other Company(ies) and Place(s) of Incorporation

5. Service Type(s) (check all that apply)				
Global or Limited Global Facilities—Based Authority (Section 63.18(e)(1))				
Global or Limited Global Resale Authority (Section 63.18(e)(2))				
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))				
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))				
6a. Is a fee submitted with this application?				
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 except those prohibited by the FCC				

	on of authority requested, e.g., Application for Authority to Provide International Facilities-Based and Reso	old Services to
	nts Except Country X)	
(If the complete de	escription does not appear in this box, please go to the end of the form to view it in its entirety.)	
	Application for Global or Limited Global Facilities-Based and Resale	
	Authority pursuant to Sections 63.18(e)(1) and (2)	
	nationally pursuant to sections 03.10(c)(1) and (2)	
O Doos the smalless	t manuact atmosphiliped management to 47 CED Section (2.129 If was include in	- >7
	at request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in	O No
Attachment 1 a state	ement of how the application qualifies for streamlined processing.	
10. If applying for au	uthority to provide switched services over private lines pursuant to Section 63.16, provide the required show	ing in
Attachment 1.	satisfies to provide switched services over private lines pursuant to section ostro, provide the required show	
A1:4: £:	1. 4 '4 44' 11 411 17 4	
Applicant certifies t	that its responses to questions 11 through 17 are true:	
11. If the applicant i	s a foreign carrier, or is affiliated (as defined in 47 C.F.R. Section 63.09(e)) with a foreign	
	ttachment 1 the information and certifications required by Section 63.18(i) through (m).	
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12. Does the applica	ant seek authority to provide service to any destination described in paragraphs (1) through (4) Yes	No
	If yes, list those destinations in Attachment 1 as a response to question 12.	•
	, and the state of	

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.		10
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.		
15. In Attachment 2, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.		
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.	O 1	10
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.	O 1	lo

CERTIFICATION

18. Typed Name of Person Signing (Must be a Corpora	· •	igning				
Rodger Desai	CEO					
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: Petition 2:	:	3:				

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