INTERNATIONAL SECTION 214 SPECIAL TEMPORARY AUTHORITY APPLICATION FOR OFFICIAL USE ONLY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:

Request for Special Temporary Authority for approval of the Joint International and Domestic Application for Transfer of Control of Empire One Telecommunications, Inc., Debtor–in–Possession to Empire One Telecommunications, Inc., an entity holding domestic and international section 214 authority.

1. Applicant Name: Empire One Telecommunications, **Phone Number:** 718–260–0800 x111 Inc DBA Name: Fax Number: 718-797-0001 55 washington Street E-Mail: butler@eot.net Street: 9th floor NY City: Brooklyn State: USA 11201 **Country:** Zipcode: Paul Butler Attention:

2. Contact							
Name:		EllenAnn G. Sands	Phone Number:	504-832-1984			
Compa	any:	Nowalsky, Bronston & Gothard	Fax Number:	504-831-0892			
Street:		3500 N. Causeway Blvd.	E-Mail:	esands@nbglaw.com			
		Suite 1442					
City:		Metairie	State:	LA			
Counti	ry:	USA	Zipcode:	70002 –			
Contac	t Title:	Counsel	Relationship:	Legal Counsel			
3. Place of Incorporation of ApplicantDelaware							
4. Other Company(ies) and Place(s) of Incorporation							
F. Camira Thank) (-11	11 (1-4 1-2)					
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 Fa	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 $63.18(e)(3)$)							

TYPE OF REQUEST							
6. New Request Extend STA Date Other	7. Date Authorization Needed: 02/23/2005						
 8. Is a fee submitted with this application? If Yes, complete and attach FCC Form 159. If No, indicate reason Governmental Entity Noncommercial educational licensee Other(please explain): 	for fee exemption (see 47 C.F.R.Section 1.1114).						
9. Description of Special Temporary Authority Requested. (If the complete description does not appear in this box, please go to the second sec	ne end of the form to view it in its entirety.)						
10. In Attachment 1, provide justification of need for special temporary authority requested.							
11. If this request for Special Temporary Authority is associated with a [e.g., ITC–214–19930101–23412] AND go to question 16.) File Number	any pending applications filed with the Commission, enter the file number						
Applicant certifies that its responses to questions 11 through 17 are true:							
12. If the applicant is a foreign carrier, or is affiliated (as defined in 4 the information and certifications required by Section 63.18(i) throug	7 C.F.R. Section 63.09(e)) with a foreign carrier, provide in Attachment 1 th (m).						

13. 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	O No
14. 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	O No
15. [Section 63.18(h)] In Attachment 2, provide the name, address, citizenship and principal business of the application of the application of the sequence of the application of the application of the sequence of the application of the appli	ant's ten perce	ent or greater
16. In Attachment 1, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.		
17. 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 Yes	O No
18. 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 Yes	O No

CERTIFICATION

19. Typed Name of Person Signing Paul Butler		20. Title of Person Signing Chief Operating Officer						
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).								
21. 1: STA for Empire One	2:	3:						

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