FORM 312–R APPLICATION FOR RENEWAL OF RADIO LICENSE IN SPECIFIED SERVICES FOR OFFICIAL USE ONLY

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

December 2011 Renewal Application for Earth Station E010288

1. Applicant

Name: Visa International Service

Phone Number:

305-328-1000

Association

DBA Name:

Fax Number:

Street:

1004 Northwest 65th Avenue

E-Mail:

Zipcode:

gomez@visa.com

City:

Miami

USA

State:

FL

33126

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6018

Attention:

Country:

Mr. Alex Gomez

2. Comaci	2.	Contact
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Name: Stephen D. Baruch Phone Number: 202–429–8970

Company: Lerman Senter PLLC Fax Number: 202–293–7783

Street: 2000 K Street, NW E–Mail: sbaruch@lermansenter.com

Suite 600

City: Washington State: DC

Country: USA Zipcode: 20006 -

Attention: Relationship: Legal Counsel

RENEWAL INFORMATION

3. Rulepart under which this filing is made Rulepart 25

4. Is a fee submitted with this app.	lication?
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- Governmental Entity Noncommercial educational licensee
- Other(please explain):

5. Application is for renewal of license in exact conformity with the existing license as specified below:	
(a)File Number	(b)Date Issued
SESLIC2001101602007	2002–01–25 00:00:00.0
(c)Call Sign	(d)Location
E010288	Hato Rey, San Juan, PR
(e)Nature of Service Domestic Fixed Satellite Service	(f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX)

(g)Expiration Date 2012–01–25 00:00:00.0	Petition to reinstate:		
6. Note any changes such as discontinuance of use of a frequency, or of a application covering this station was filed: No changes.	type of emission or of a transmitter which have been made since the last		
Items 7(a) and (b) apply to Part 21 licenses only.			
7(a) Has there been removal of equipment or alteration of facilities as to	· · · · · · · · · · · · · · · · · · ·		
	O No		
If YES when:	N/A		
(b) If this is a Multipoint Distribution Service (MDS) station, is there a cwith, or leasing arrangement with a cable television company?	O No		
	N/A		
8. Applicant represents that there has been no change in applicant's orga applicant's relation to the station, or financial responsibility; that application identified below, is to be considered as a part of this application, and the here any further exceptions, not already covered in question 6 or 7. File Number SES-LIC-20011016-02007Date 01/25/2002	ants most recent application or report embodying this information, as		

9. Would a Commission grant of this application come within 47 CFR 1.1307, such that it may have a significant environmental impact?	000	Yes No N/A	
If YES, attach as an Exhibit an Environmental Assessment required by 47 CFR 1.1311:			
If NO, Explain briefly why not: License renewal only; no technical modification requested.			
10. Certification: The applicant certifies that, in the case of an individual applicant, he or she is not subject to a denial of federal benefits pursuant to section 5301 of Anti–Drug Abuse Act of 1988, 21 U.S.C. 853a, or, in the case of a nonindividual applicant (e. g., corporation, partnership or other unincorporated association), no party to the application is subject to denial of federal benefits pusuant to that section. For the definition of a "party" for these purposes, see 47 CFR 1.2002(b).	0	Yes No	
a. Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests a station license in accordance with this application. Applicant acknowledges that all attached exhibits are a material part hereof. b. The undersigned, individually and for the applicant, hereby certifies that the statements made in this application are true, complete and correct to the best of the signer's knowledge and belief, and are made in good faith.			
11. Designate Appropriate Classification:			
O Individual			
O Unincorporated Association			
O Partnership			
© Corporation			
O Governmental Entity			
Other (please specify)			

12. Please supply any need attachments.

1:	2:		3:			
CERTIFICATION						
13. Typed Name of Person Signing Alex Gomez		14. Title of Person Signing Authorized Employee				
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / ORIMPRISONMENT (U.S. Code, Title 18, Section1001), AND/OR REVOCATION OF ANY STATIONAUTHORIZATION (U.S. Code, Title 47, Section312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).						

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