APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA Extension Request (9.0 Modification)

1. Applicant

Name: Newcom International, Inc. **Phone Number:**

305-627-6000

DBA Name:

Fax Number:

305-627-6001

Street:

15590 NW 15th Avenue

E-Mail:

City:

MIAMI

State:

FL

Country:

USA

Zipcode:

33169

Attention:

Mr Jaime Dickinson

2. Contact				
Name:	Troy Tanner	Phone Number:	202-295-8360	
Company:	Swidler Berlin LLP	Fax Number:	202-424-7647	
Street:	3000 K Street, N.W.	E–Mail:	tftanner@swidlaw.com	
	Suite 300			
City:	Washington	State:	DC	
Country:	USA	Zipcode:	20007 -5116	
Attention:		Relationship:	Legal Counsel	
application. Please ento 3. Reference File Num 4a. Is a fee submitte If Yes, complete ar Governmental Ento Other(please expla	er only one.) aber SESMFS2004120601790 ad with this application? ad attach FCC Form 159. If Note that the second in the secon	or Submission ID To, indicate reason for fee exemptional licensee	e file number or the IB Submission ID of the related n (see 47 C.F.R.Section 1.1114).	
4b. Fee Classification	CGX – Fixed Satellite Transn	nit/Receive Earth Station		
5. Type Request O Use Prior to Grant O Change Station Location O Other				
6. Requested Use Prior 03/20/2006	Date			
7. CityMiami		8. Latitude (dd mm ss.s h)	25 54 59.3 N	

9. State FL	10. Longitude (dd mm ss.s h) 80 13 29.2 W			
11. Please supply any need attachments.				
Attachment 1: Attachment 2:	Attachment 3:			
12. Description. (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)				
Applicant NewCom International requests an extension of its Special Temporary Authority, SES-STA-20050812-01098, from the current expiration date of 3/19/2006 to 9/20/2006. NewCom is operating under the current STA while its modification application is pending before the Commission, including a request to add the Express 3A as a point of communication.				
13. 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.				
14. Name of Person Signing Jaime Dickinson	15. Title of Person Signing President/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).				

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12. Description

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