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OF COUNSEL
THOMPSON BENNETT
JOHN T. PETERS, JR.
VINCENT T. EARLY
(1922 - 2001)
JOSEPH J. BURGIE
(1926 - 1992)

October 21, 2002

Florida Public Service Commission
Division of Records and Reporting
2540 Shumard Oak Blvd
Tallahassee FL 32399-0850

021116-TX

RECEIVED
OCT 31 AM 11:28
COMMISSION
CLERK

Re: Enhanced Communications Network, Inc. dba Asian American Association

Dear Sir:

Enclosed herewith for filing with the Commission, please find an original and 6 (six) copies of the above captioned corporation's APPLICATION FOR AUTHORITY TO PROVIDE ALTERNATIVE LOCAL EXCHANGE SERVICE WITHIN THE STATE OF FLORIDA, along with a check in the amount of \$250.00 to cover filing fees relating to same.

Also enclosed is an exact duplicate of this filing. Please stamp the duplicate received and return same in the self-addressed stamped envelope attached thereto.

Please contact the undersigned if you have additional questions or concerns.

Very truly yours,

EARLY, LENNON, CROCKER & BARTOSIEWICZ, P.L.C.


Patrick D. Crocker
PDC/ren

RECEIVED & FILED


FPSC-BUREAU OF RECORDS

Check received with filing and forwarded
to fiscal for deposit. Fiscal to forward
deposit information to Records.

Initials of person who forwarded check:



OCT 31 AM 10:11

DISTRIBUTION CENTER

DOCUMENT NUMBER-DATE

11927 OCT 31 8

FPSC-COMMISSION CLERK

**BEFORE THE
STATE OF FLORIDA
PUBLIC SERVICE COMMISSION**

Application of Enhanced Communications Network, Inc.)
dba Asian American Association)
for Authority to Provide Alternative)
Local Exchange Service Statewide)

APPLICATION

Patrick D. Crocker
Early, Lennon, Crocker & Bartosiewicz, P.L.C.
900 Comerica Building
Kalamazoo, MI 49007

APPLICATION

1. This is an application for \sqrt (check one):

- Original certificate** (new company).
- Approval of transfer of existing certificate:** Example, a certificated company purchases an existing company and desires to retain the original certificate of authority.
- Approval of assignment of existing certificate:** Example, a certificated company purchases an existing company and desires to retain the certificate of authority of that company.
- Approval of transfer of control:** Example, a company purchases 51% of a certificated company. The Commission must approved the new controlling entity.

2. Name of Company:

Enhanced Communications Network, Inc. dba Asian American Association

3. Name under which the applicant will do business (fictitious name, etc.):

Asian American Association

4. Official mailing address (including street name and number, post office box, city, state, zip code):

1031 S Glendora Avenue

West Covina, CA 91790

5. Florida address (including street name & number, post office box, city, state, zip code):

None

6. Structure of organization:

- Individual
- Foreign Corporation
- General Partnership
- Other - Limited Liability Company
- Corporation
- Foreign Partnership
- Limited Partnership

7. If individual, provide:

Name: _____

Title: _____

Address: _____

City/State/Zip: _____

Telephone No.: _____ Fax No.: _____

Internet E-Mail Address: _____

Internet Website Address: _____

8. If incorporated in Florida, provide proof of authority to operate in Florida:

(a) The Florida Secretary of State corporate registration number:

_____ N/A _____

9. If foreign corporation, provide proof of authority to operate in Florida:

(a) The Florida Secretary of State corporate registration number:

_____ See Exhibit A _____

10. If using fictitious name-d/b/a, provide proof of compliance with fictitious name statute (Chapter 865.09, FS) to operate in Florida:

(a) The Florida Secretary of State fictitious name registration number:

_____ N/A _____

11. **If a limited liability partnership, provide proof of registration to operate in Florida:**

(a) The Florida Secretary of State registration number:

N/A

12. **If a partnership, provide name, title and address of all partners and a copy of the partnership agreement.**

Name: _____

Title: _____

Address: _____

City/State/Zip: _____

Telephone No.: _____ Fax No.: _____

Internet E-Mail Address: _____

Internet Website Address: _____

13. **If a foreign limited partnership, provide proof of compliance with the foreign limited partnership statute (Chapter 620-169, FS), if applicable.**

(a) The Florida Registration number: N/A

14. **Provide F.E.I. Number (if applicable):** 22-3558165

15. **Indicate of any of the officers, director, or any of the ten largest stockholders have previously been:**

(a) **adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings. Provide explanation.**

None have been adjudged bankrupt, mentally incompetent, or guilty of any felony or crime.

(b) an officer, director, partner or stockholder in any other Florida certificated telephone company. If yes, give name of company and relationship. If no longer associated with company, give reason why not.

_____ No _____

16. Who will serve as liaison to the commission with regard to the following?

(a) The application:

Name: Patrick D. Crocker

Title: Attorney

Address: 900 Comerica Building

City/State/Zip: Kalamazoo, MI 49007

Telephone No.: 269-381-8844 Fax No.: 269-381-8822

Internet E-Mail Address: pcrocker@earlylennon.com

Internet Website Address: www.telecomattorney.com

(b) Official point of contact for the ongoing operations of the company:

Name: Raymond Chan

Title: President

Address: 1031 S Glendora Avenue

City/State/Zip: West Covina, CA 91790

Telephone No.: 626-445-6636 Fax No.: 626-356-7478

Internet E-Mail Address: Thomas.Haluskey@ECNTel.com

Internet Website Address: www.aaats.com

(c) Complaints/Inquiries from customers:

Name: Raymond Chan

Title: President

Address: 1031 S Glendora Avenue

City/State/Zip: West Covina, CA 91790

Telephone No.: 626-445-6636 **Fax No.:** 626-356-7478

Internet E-Mail Address: _____

Internet Website Address: _____

17. List the states in which the applicant:

(a) has operated as an alternative local exchange company.

N/A

(b) has applications pending to be certificated as an alternative local exchange company.

California, Texas and New Jersey

(c) is certificated to operate as an alternative local exchange company.

New York

(d) has been denied authority to operate as an alternative local exchange company and the circumstances involved.

Applicant has not been denied authority to operate as an alternative local exchange company in any jurisdiction.

(e) has had regulatory penalties imposed for violations of telecommunications statutes and the circumstances involved.

Applicant has had no regulatory penalties imposed for violations of telecommunications statutes.

(f) has been involved in civil court proceedings with an interexchange carrier, local exchange company or other telecommunications entity, and the circumstances involved.

Applicant has not been involved in any civil court proceedings with an interexchange carrier, local exchange company or other telecommunications entity.

3. Submit the following:

A. Financial capability.

The application should contain the applicant's audited financial statements for the most recent 3 years. If the applicant does not have audited financial statements, it shall so be stated.

The unaudited financial statements should be signed by the applicant's chief executive officer and chief financial officer affirming that the financial statements are true and correct and should include:

- 1. The balance sheet;**
- 2. Income statement; and**
- 3. Statement of retained earnings.**

NOTE: This documentation may include, but is not limited to, financial statements, a projected profit and loss statement, credit references, credit bureau reports, and descriptions of business relationships with financial institutions.

Further, the following (which included supporting documentation) should be provided:

- 1. written explanation that the applicant has sufficient financial capability to provide the requested service in the geographic area proposed to be served.**
- 2. written explanation that the applicant has sufficient financial capability to maintain the requested service.**
- 3. written explanation that the applicant has sufficient financial capability to meet its lease or ownership obligations.**

See Exhibit B.

- B. Managerial capability: give resumes of employees/officers of the company that would indicate sufficient managerial experience of each.**

See Exhibit C.

- C. Technical capability: give resumes of employees/officers of the company that would indicate sufficient technical experiences or indicate what company has been contracted to conduct technical maintenance.**

See Exhibit C.

**** APPLICANT ACKNOWLEDGMENT OF STATEMENT ****

1. **REGULATORY ASSESSMENT FEE:** I understand that all telephone companies must pay a regulatory assessment fee in the amount of .15 of one percent of gross operating revenue derived from intrastate business. Regardless of the gross operating revenue of a company, a minimum annual assessment fee of \$50 is required.
2. **GROSS RECEIPTS TAX:** I understand that all telephone companies must pay a gross receipts tax of two and one-half percent on all intra and interstate business.
3. **SALES TAX:** I understand that a seven percent sales tax must be paid on intra and interstate revenues.
4. **APPLICATION FEE:** I understand that a non-refundable application fee of \$250.00 must be submitted with the application.

UTILITY OFFICIAL

Signature	<u>Ray Chan</u>	Date	<u>10-3-02</u>
Title	<u>President</u>	Telephone No.	<u>626-445-6636</u>
Address:	<u>1031 S Glendora Avenue</u>	Fax No.	<u>626-356-7478</u>
	<u>West Covina CA 91790</u>		

ATTACHMENTS:

- A - CERTIFICATE SALE, TRANSFER, ASSIGNMENT STATEMENT
- B - INTRASTATE NETWORK
- C - AFFIDAVIT

CERTIFICATE SALE, TRANSFER, OR ASSIGNMENT STATEMENT

Not applicable

INTRASTATE NETWORK (if available)

Chapter 25-24.825 (5), Florida Administrative Code, requires the company to make available to staff the alternative local exchange service areas only upon request.

1. POP: Addresses where located, and indicate if owned or leased.

- | | |
|-------------------|-------------------|
| 1) _____
_____ | 2) _____
_____ |
| 3) _____
_____ | 4) _____
_____ |

2. SWITCHES: Address where located, by type of switch, and indicate if owned or leased.

- | | |
|-------------------|-------------------|
| 1) _____
_____ | 2) _____
_____ |
| 3) _____
_____ | 4) _____
_____ |

3. TRANSMISSION FACILITIES: POP-to-POP facilities by type of facilities (microwave, fiber, copper, satellite, etc.) and indicate if owned or leased.

<u>POP-to-POP</u>	<u>OWNERSHIP</u>
1) _____	_____
2) _____	_____
3) _____	_____
4) _____	_____

AFFIDAVIT

By my signature below, I, the undersigned officer, attest to the accuracy of the information contained in this application and attached documents and that the applicant has the technical expertise, managerial ability, and financial capability to provide alternative local exchange company service in the State of Florida. I have read the foregoing and declare that, to the best of my knowledge and belief, the information is true and correct. I attest that I have the authority to sign on behalf of my company and agree to comply, now and in the future, with all applicable Commission rules and orders.

Further, I am aware that, pursuant to Chapter 837.06, Florida Statutes, "Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 and s.775.083."

UTILITY OFFICIAL:

<u>Ray Chan</u>		<u>10 3 02</u>
Signature	Raymond Chan	Date
<u>President</u>		<u>626-445-6636</u>
Title		Telephone No.
Address:	<u>1031 S Glendora Avenue</u>	<u>626-356-7478</u>
	<u>West Covina, CA 91790</u>	Fax No.
<hr/>		

EXHIBIT A

Certificate of Authority to Transact Business

FILED

FILED
Nov 14, 2001 8:00 am
Secretary of State

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Section 1

1. ASIAN AMERICAN ASSOCIATION
Fictitious Name to be Registered

2. 6562 Corby Avenue
Mailing Address of Business

Arcadia, CA 91007
City State Zip Code

3. Florida County of principal place of business Leon

4. FEI Number: _____

G01918900142
-11/14/01 -01022-045
\$460.00

This space for office use only

Section 2

A. Owner(s) of Fictitious Name if individual(s): (Use an attachment if necessary):

1. Last: _____ First: _____ M.I.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
SSN: _____

2. Last: _____ First: _____ M.I.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
SSN: _____

B. Owner(s) of Fictitious Name if other than individual(s): (Use attachment if necessary):

1. ENHANCED COMMUNICATIONS NETWORK, INC.
Entity Name
6562 Corby Avenue
Address
Arcadia, CA 91007
City State Zip Code
Florida Registration Number 99800000215
FEI Number: _____
 Applied for Not Applicable

3. Entity Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Florida Registration Number: _____
FEI Number: _____
 Applied for Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. I (we) further certify that the fictitious name shown in Section 1 of this form has been advertised at least once in a newspaper as defined in chapter 50, Florida Statutes, in the county where the applicant's principal place of business is located. I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

Signature of Owner: _____ Date: _____
Phone Number: _____

Signature of Owner: _____ Date: _____
Phone Number: _____

Section 4

FOR CANCELLATION COMPLETE SECTION 4 ONLY.
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:

I (we) the undersigned, hereby cancel the fictitious name _____
which was registered on _____ and was assigned registration number _____

Signature of Owner: _____ Date: _____
Signature of Owner: _____ Date: _____

Mark the applicable boxes Certificate of Status - \$10 Certified Copy - \$30
Filing Fee: \$30

Note: Acknowledgements/certificates will be sent to the address in Section 1 only. CH4E-001 (5/96)

11/14/01
SV

EXHIBIT B

Financial Capability

ENHANCED COMMUNICATIONS NETWORK, INC.
(A Delaware Corporation)

d.b.a. Asian American Association

FINANCIAL STATEMENTS

August 31, 2002

(Preliminary)

ENHANCED COMMUNICATIONS NETWORK INC.
(A Delaware Corporation)
dba Asian American Association

BALANCE SHEET
August 31, 2002
(Preliminary)

ASSETS

CURRENT ASSETS

Cash and cash equivalents	\$ 1,015,883
Accounts receivable-Net	246,479
Prepaid expenses	30,760
	<u>1,293,122</u>

FIXED ASSETS

Furniture, fixture and equipment	211,953
Accumulated Depreciation	(48,754)
	<u>163,199</u>

OTHER ASSETS

Deposit	141,402
	<u>141,402</u>
	<u>\$ 1,597,723</u>

LIABILITIES AND SHAREHOLDER'S EQUITY

CURRENT LIABILITIES

Accounts payable	\$ 547,290
Telecommunication taxes payable	189,489
	<u>736,780</u>

LONG-TERM LIABILITIES

Notes payable	910,000
Capital lease payable	31,772
	<u>941,772</u>

SHAREHOLDER'S EQUITY

Common stock	10,000
Additional paid-in capital	20,000
Retained earnings	(5,792)
Current earnings	(105,037)
	<u>(80,829)</u>
	<u>\$ 1,597,723</u>

Enhanced Communications Network, Inc.
(A Delaware Corporation)
dba Asian American Association

STATEMENT OF PROFIT & LOSS
For the year-to-date ending August 31, 2002
(Preliminary)

	<u>YTD</u>
NET REVENUE	\$ 4,546,779
COST OF REVENUE	1,968,463
GROSS PROFIT	2,578,316
OPERATING EXPENSES	
Sales & Marketing Expenses	302,438
General & Administrative Expenses	<u>2,279,571</u>
	<u>2,582,010</u>
NET INCOME (LOSS) BEFORE INTEREST, DEP.	(3,694)
Depreciation	48,754
Interest expense	<u>50,519</u>
	<u>99,273</u>
NET PROFIT (LOSS) BEFORE TAX	(102,967)
Income tax	2,070
NET PROFIT (LOSS)	<u>\$ (105,037)</u>

1. Applicant has sufficient financial capability to provide the requested service in the geographic areas proposed to be served. Applicant's operating revenue will provide Applicant with sufficient financial resources to provide service in the proposed areas.
2. Applicant has sufficient financial capability to maintain the requested service in the geographic areas proposed to be served. Applicant's operating revenue will provide Applicant with sufficient financial resources to maintain service in the proposed areas.
3. Applicant will operate as a resold provider. Applicant has sufficient financial capability to meet lease or ownership obligations in the geographic areas proposed to be served. Applicant's operating revenue will provide Applicant with sufficient financial resources to meet lease or ownership obligations in the proposed areas.

EXHIBIT C

Management Resumes

RAYMOND CHAN

BIOGRAPHY

EXPERIENCE

2001 - present Pacific Telecom, Inc. Bensalem, PA

President

- Oversee marketing strategic to cater the trend of telecom industry
- Managing & leading company direction

1997 - present RC Consulting Group, LLC West Covina, CA

Founder

- New Project Development & Management Consultation
- Specialize International Finance & Insurance
- Implemented Private Asset Placement Programs

1972 - 1997 Capital Resource Network, Inc. West Covina, CA

President

- Direct overall Personal Financial Management Services for clientele
- Develop full range of Insurance Products, Financial Products for operation

EDUCATION

Californian State University of Los Angeles LA, CA

- Finance & Marketing
-
-