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RECEIVED
PUBLIC UTILITIES
REGULATORY COMMISSION

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

#1129 96 APR 15 PM 2 07
\$100 MAIL ROOM
JAF 4/13/96

1. LEGAL NAME OF THE APPLICANT

Rochard Lamothe

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

Super Goal Multi Services Inc.

3. ADDRESS OF THE APPLICANT(S)

STREET 2890 N.W. 35 TH ST

CITY Miami

STATE & ZIP Florida 33142

4. TYPE OF ORGANIZATION (CHECK ONE)

A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER:
OWN NAME.

DOCUMENTATION: No other documentation needed.

B. PARTNERSHIP:

DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the name and address of all partners.

C. CORPORATION:

DOCUMENTATION: Attach proof that articles of incorporation have been filed with the Florida Secretary of State's Office. If incorporated outside of Florida, attach proof from the Florida Secretary of State that applicant has authority to operate in Florida and provide name and address of Florida Registered Agent.

NAME Reynold Heraux

ADDRESS 9400 S Dadeland Blvd #330

Miami, Fl

D. DOING BUSINESS UNDER A FICTITIOUS NAME:

DOCUMENTATION: Attach proof that fictitious name has been registered with the Florida Secretary of States Office.

5. PROVIDE NAME, TITLE, AND TELEPHONE NUMBER OF THE INDIVIDUAL WHO IS RESPONSIBLE FOR COMMISSION CONTACTS:

NAME: Rochard Lamothe

TITLE: Incorporator/General Manager

PHONE: (305)634-4888

6. HAS APPLICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., OR IN THE CASE OF A CLOSELY HELD CORPORATION ANY SHAREHOLDER OF THE APPLICANT EVER BEEN GRANTED OR DENIED A PAY TELEPHONE CERTIFICATE IN THE STATE OF FLORIDA? THIS INCLUDES ACTIVE AND CANCELLED PAY TELEPHONE CERTIFICATES.

No

7. IF THE ANSWER TO QUESTION 6 IS YES, PLEASE EXPLAIN AND LIST THE CERTIFICATE HOLDER AND CERTIFICATE NUMBER.

8. LIST THE STATES IN WHICH THE APPLICANT:

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE

B. HAS APPLICATIONS PENDING TO BE CERTIFICATED AS A PAY TELEPHONE PROVIDER.

FL

C. HAS BEEN DENIED AUTHORITY TO OPERATE AS A PAY TELEPHONE PROVIDER. EXPLAIN CIRCUMSTANCES.

9. PLEASE CHECK THE SERVICES THAT WILL BE PROVIDED:

LOCAL	[X]
LONG DISTANCE	[X]
COIN	[]
CALLING CARD	[X]
CREDIT CARD	[]
OTHER, DESCRIBE	[]

10. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR: 4.

11. HOW DOES THE APPLICANT INTEND TO SERVICE AND MAINTAIN EACH PAYPHONE?

PERSONALLY	[]
FULL-TIME TECHNICIAN	[X]
PART-TIME TECHNICIAN	[]
SERVICE/REPAIR/MAINTENANCE CONTRACT	[]
OTHER, DESCRIBE	[]

12. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL PROVIDE ACCESS TO ALL LOCALLY AVAILABLE LONG DISTANCE CARRIERS VIA 10XXX+0, 950-XXXX, AND 1-800? (See Rule 25-24.515(6), F.A.C.)

Yes

13. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL CONFORM TO SUBSECTIONS 4.29.2 - 4.29.4 and 4.29.7 - 4.29.8 OF THE AMERICAN NATIONAL STANDARDS SPECIFICATIONS FOR MAKING BUILDINGS AND FACILITIES ACCESSIBLE AND USABLE BY PHYSICALLY HANDICAPPED PEOPLE (ATTACHMENT F)? (See Rule 25-24.515(14), F.A.C.)

Yes

APPLICANT ACKNOWLEDGEMENT CARD

Applicant Richard Lamothe

I acknowledge receipt and understanding of the Florida Public Service Commission's Rules and Requirements relating to my provision of Pay Telephone Service.

Signature Richard Lamothe

Title Incorporator/General Manager

Date 4-12-96

THIS MUST BE COMPLETED AND RETURNED WITH THE APPLICATION BEFORE THE CERTIFICATION PROCESS BEGINS. FAILURE TO DO SO WILL RESULT IN A DELAY OF THE CERTIFICATE BEING ISSUED.

I, THE UNDERSIGNED OWNER OR OFFICER OF THE ABOVE NAMED ENTITY, HAVE READ THE FOREGOING AND DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION IS A TRUE AND CORRECT STATEMENT. I AM AWARE THAT PURSUANT TO s. 837.06, FLORIDA STATUTE, 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. I WILL COMPLY WITH ALL CURRENT AND FUTURE COMMISSION REQUIREMENTS REGARDING THE PAY TELEPHONE SERVICE. I UNDERSTAND THAT A NON-REFUNDABLE APPLICATION FEE OF \$100 MUST ACCOMPANY THE APPLICATION. ALSO, I UNDERSTAND THAT I AM REQUIRED TO PAY A REGULATORY ASSESSMENT FEE (MINIMUM \$50.00 PER CALENDAR YEAR), FILE AN ANNUAL PAY TELEPHONE SERVICE REPORT, AND PAY GROSS RECEIPTS TAX. FURTHERMORE, I AGREE TO KEEP THE COMMISSION ADVISED OF ANY CHANGES IN THE NAMES OR ADDRESSES LISTED ABOVE WITHIN TEN (10) DAYS OF THE CHANGE.

Richard Lambly

(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: 4-12-96

ARTICLES OF INCORPORATION.

OF

SUPERGOAL CORP

I, the undersigned incorporator of this corporation under chapter 607, Florida Statutes, as amended, adopt the following Articles of Incorporation:

ARTICLE I - NAME

The name of the corporation is: SUPERGOAL CORP

ARTICLE II - PURPOSE

The general nature of this business to be conducted by this corporation is :

- 1-Multiservices. Telephone services.
- 2-To employ, hire and appoint corporations, firms and individuals in any and all parts of the world to act as agents in such capacity and on such conditions as may be determined from time to time by the Board of Directors.
- 3-To acquire by purchase, lease or otherwise, and operate vehicles or equipment of every description.
- 4-To purchase, lease or otherwise acquire, equip, hold, own, improve, develop, manage, maintain, control, operate, lease, mortgage, create security interest in, create liens upon, sell, convey, dispose of and turn to account any and all property, real and personal, improved and unimproved of every kind and description, incidental to, connected or suitable, necessary or convenient for any of the purposes enumerated herein, including all or any part or parts of properties, assets, business and goodwill of any persons, corporations or associations.
- 5-To carry on any other business or enterprise which may be carried on or exercised by a corporation organized under 607, Florida Statutes, as amended, except a banking, safe deposit, trust, insurance surety, express, railroad, canal, telephone or cementary company, a building and loan association, fraternal benefit society, state fair or exposition.
- 6-To import and export merchandise of all kinds.

ARTICLE III - CAPITAL STOCK

The maximum number of shares which this corporation is authorized to have outstanding at any time is 5000 shares of common stock having a par value of \$ 1.00. The board of directors may authorize the issuance of such stock to such persons upon terms and for such consideration as they may deem appropriate. The consideration may

include money or other property shall be received at just valuation to be fixed by the Board of Directors of the corporation. All such stock when issued shall be fully paid for and exempt from assessment.

ARTICLE IV - DURATION

This corporation shall have perpetual existence.

ARTICLE V - PRINCIPAL PLACE OF BUSINESS

The principal office of this corporation shall be, 13710 F S.W. 56 STR #163, MIAMI, FL 33175 or other such place as may be designated by the Board of Directors.

ARTICLE VI - DIRECTORS

The initial Board of Directors shall consist of 2 member(s). The number of directors may be increased or decreased from time to time by vote of the stockholders, but in no case shall the number of directors be less than one. Said directors shall be of full age and at least one of them be a citizen of the United States. Any director may be removed without cause at any annual meeting of stockholders where a quorum is present in person or proxy.

ARTICLE VII - INITIAL OFFICERS

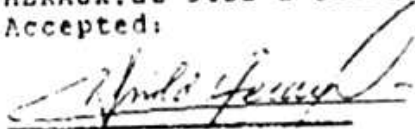
The name and address of the member(s) of the first Board of Directors is/ARE:

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
PATRICK TARDIEU	President and Secretary	13710 F S.W. 56 STR #163, MIA FL 33175
TCHALY ELEAZARD	Vice-President	2351 N.E. 185 STR MIAMI, FL 33180

ARTICLE VIII - INITIAL REGISTERED AGENT

The initial registered agent of the corporation to accept service of process within the State of Florida is designated as REYNOLD HERAUX, at 9400 S Dadeland Blvd # 330 Miami, Florida 33156

Accepted:


REYNOLD HERAUX

ARTICLE IX - MANAGEMENT BY SHAREHOLDERS

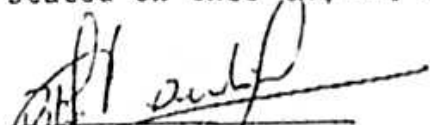
All corporate power shall be exercised exclusively by or under the authority of the shareholders, and the business and affairs of this Corporation shall be managed under the direction of the shareholders. The shareholders shall elect the following officers: a President, a Treasurer, and a secretary, and as many Vice-Presidents, Assistant Treasurer as the shareholders, from time to time, deem advisable, provided that any one or more of said officers may be held by the same person, except the offices of President or Vice-President shall not be held by the secretary or any assistant Secretary of the corporation.

The annual meeting of the Corporation shall be held on such date as is provided in the Bylaws of the Corporation, which said Bylaws may be amended at any time in accordance with their provisions. The incorporator shall manage the business of the Corporation until there are issued and outstanding shares of stock standing in the names of the shareholders of record.

ARTICLE X - UNANIMOUS CONSENT

The shareholders, by unanimous consent evidence by a writing include among the minutes of the Corporation, may agree to the doing of any act, and such consent in writing as aforesaid shall have the same force and effect as though a formal meeting had been pursuant to a call being duly made, and as though the said act had been done and authorized at a meeting at which a quorum had been present.

IN WITNESS WHEREOF, the persons named below have hereby executed these ARTICLES OF CORPORATION for the uses and purposes therein stated on this 24 day of MAY, 1995


PATRICK TARDIEU

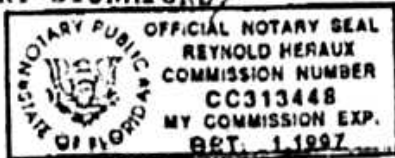

TCHALY BLEAZARD

STATE OF FLORIDA
COUNTY OF DADE

I, HEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared PATRICK TARDIEU and TCHALY ELEAZARD, to me known to the person(s) described as subscriber to the foregoing ARTICLES OF INCORPORATION in and executed the same freely and voluntarily for the uses and purposes therein expressed.

WITNESS my hand and official seal at DADE COUNTY, FLORIDA, this
24 day of MAY, 1995.


NOTARY SIGNATURE



FILED

95 JUN -8 AM 9:34

SECRET
TALLAHASSEE

REGISTERED AGENT

In pursuance of chapter 48.092, Florida Statutes, the following is submitted in compliance with said Act.
That SUPERGOAL CORP desiring to organize under the laws of the State of Florida, with its principal office at indicated in the ARTICLES OF INCORPORATION AT THE CITY OF MIAMI, County of Dade, State of Florida has named REYNOLD HERAUX located at 9400 S Dadeland blvd #330 Miami, State of Florida, as its agent to accept service of process within the State, I hereby accept and are familiar with the duty of being a registered agent in the State of Florida.

Reynold Heraux

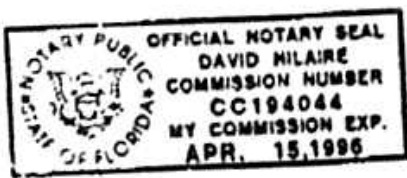
REYNOLD HERAUX

STATE OF FLORIDA
COUNTY OF DADE

I, HEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the state and county above named, to take acknowledgment, personally appeared REYNOLD HERAUX to me well known to be the person described in and who executed the foregoing Registered Agent Certificate and acknowledged before me that he subscribed to said Certificate.
WITNESS my hand and official seal in the County and State above named this 25th day of MAY, 1995.

My commission expires:

David Nilaire
NOTARY PUBLIC



State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Incorporation of SUPERGOAL CORP, a Florida corporation, filed on June 8, 1995, as shown by the records of this office.

The document number of this corporation is P95000044452.

Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
Ninth day of June, 1995



CR2EO22 (1-95)

Sandra B. Northam

Sandra B. Northam
Secretary of State

**ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF**

SUPER GOAL CORPORATION

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: *(indicate article number(s) being amended, added or deleted)*

Added: MR. ROCHARD LAMOTHE
4951 ROTFCHILD DRIVE
CORAL SPRINGS, FLORIDA 33067

AS INCORPORATOR OF
SUPER GOAL CORPORATION

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendment's adoption: 10/01/95

FOURTH: Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups.
The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

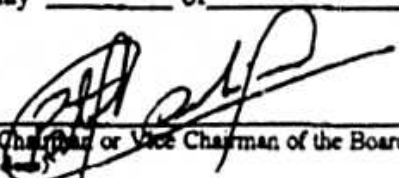
"The number of votes cast for the amendment(s) was/were sufficient for approval by _____
voting group"

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this day 1st of October, 19 95

Signature


(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

PATRICK TARDIEU
Typed or printed name

PRESIDENT

Title

BELLEGRADE, FLORIDA 33430

City BELLEGRADE, Florida 33430
Zip Code

3. Florida County PALM BEACH

4. FEI Number: _____

This space for office use only

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

1. _____
 Last First MI

 Address

 City State Zip Code
 SS# _____

2. _____
 Last First MI

 Address

 City State Zip Code
 SS# _____

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

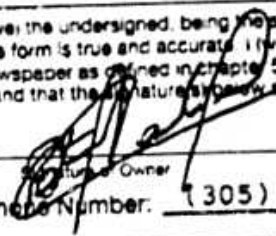
1. SUPER GOAL CORPORATION
 Entity Name
 8449 N.E. 2nd AVENUE
 Address
 MIAMI, FLORIDA 33138
 City State Zip Code
 Florida Registration Number p95000044452
 FEI Number: 65-0589339
 Applied for Not Applicable

2. _____
 Entity Name

 Address

 City State Zip Code
 Florida Registration Number _____
 FEI Number: _____
 Applied for Not Applicable

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 signatures below shall have the same legal effect as if made under oath. (At Least One Signature Required)

 _____
 Signature of Owner Date 10/30/95
 Phone Number: (305) 634-4888

 Signature of Owner Date
 Phone Number: _____

**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: \$50

Note: Acknowledgements/certificates will be sent to the address in Section 1 only. CR4E-001 (3/95)

Application for Registration:
(respond to A, B, and C)

- New business.
 Additional location or additional taxable business activity.
 Please enter your current Sales Tax number and business name below.

____-____-____-____-____-____-____-____

- Change. Specify type and effective date:

Ownership _____ Legal Entity or _____ County Location; as of ____/____/____

____-____-____-____-____-____-____-____

(Enter old Sales Tax number)

(Enter former business name)

- B. This application is for: Sales Tax Use Tax (using items purchased) Sales & Use Tax
(check only one)

- C. If seasonal business, active from: _____ to: _____
Month Beginning Month Ending

18. Type of Business Activity:
(check all that apply)

- Sale of merchandise or other items at wholesale, retail, or both (check one)
 Rental of living accommodations for 6 months or less, or more than 6 months (check one)
 Rental of commercial real property
 Taxable services
 Admissions
 Rental of equipment or other tangible personal property
 Sale of telecommunications services
 Sale of electrical power or energy

19. Major Business Activity:

Services - Cargo etc

What is the primary (50.1% or more) business activity or type of products being sold, such as Grocery, Equipment Rental, Motel, Restaurant, Jewelry, Department Store. Please be specific.

20. If Business Location is Rented
Provide the Following:

Landlord's Name: Antonio Ward
 Address: 8449 N.E. 2nd Avenue
 City, State, Zip: Miami, Florida 33130
 Telephone No.: _____
 Area Code _____

Business Owners and Bank Information

21. Name of the Business or Real Property Owner, Primary Partners or Principal Corporate Officers:

Name	Social Security Number	Home Address	Telephone Number
Patrick Tardieu		13802 S.W. 138th Place Miami, Florida 33186	305 / 634 - 4888
Charlie Elezzard		2371 N.E. 185th Street Miami, Florida 33180	305 / 751 - 4044
Rochard Lamothe		4951 Rothschild Drive Coral Spring, Fl. 33067	305 / 742 - 1427
			/ -

22. Barnett Bank
Business Bank Name

1596259406
Primary Business Account Number

7900 N.E. 2nd Avenue

Miami

Florida

33138

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

RECEIVED
FEB 11 1996

111-96 APR 15 11 2 47

1. LEGAL NAME OF THE APPLICANT

Richard Lamothe

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

Super Goal Multi Services Inc.

3. ADDRESS OF THE APPLICANT(S)

STREET 2890 N.W. 35 TH ST
CITY Miami
STATE & ZIP Florida 33142

DEPOSIT TREAS. REC. DATE
02 15 1996 APR 10 1996

4. TYPE OF ORGANIZATION (CHECK ONE)

A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER:
OWN NAME.

DOCUMENTATION: No other documentation needed.

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DOCUMENTATION: Attach proof that articles of incorporation have been filed with the Florida Secretary of State's Office. If incorporated outside of Florida, attach proof from the Florida Secretary of State that applicant has authority to operate in Florida and provide name and address of Florida Registered Agent.

1129

**SUPER GOAL
MULTI SERVICES INC.**
2890 N.W. 35TH ST
MIAMI, FL 33142-5259

4-12 1996

\$ 100 -

DOLLARS

PAY TO THE
ORDER OF

Public Service Commission

~~One~~ Hundred and ⁵⁰/₁₀₀.



037-041
7900 Northeast 2nd Avenue
Miami, Florida 33138

FOR Pay Telephone Service Certification

Richard Lamothe