



210 N. Park Ave.
Winter Park, FL
32789

P.O. Drawer 200
Winter Park, FL
32790-0200

Tel: 407-740-8575
Fax: 407-740-0613
tmi@tminc.com

December 13, 1999

Overnight

Blanca Bayo, Director
Division of Records and Reporting
Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, FL 32399-0870

RE: Initial Application for Certificate to Provide Pay Telephone Services within the State of Florida.

Paramount International Telecommunications, Inc. d/b/a R Network

Dear Ms. Bayo:

Enclosed for filing are the original and six (6) copies of the above-referenced application of Paramount International Telecommunications, Inc. d/b/a R Network. Also enclosed is a \$100 check to cover the filing fee.

Please acknowledge receipt of this filing by returning, filed stamped, the extra copy of this letter in the self-addressed stamped envelope.

I may be reached at (407) 740-8575 with any questions, comments or correspondence regarding this application. Thank you for your assistance.

Sincerely,

Monique Byrnes
Consultant to
Paramount International Telecommunications, Inc. d/b/a R Network

cc: Dave Paton - Paramount
file: Paramount - FL
tms: flo9901

RECEIVED
FLORIDA PUBLIC
SERVICE COMMISSION

99 DEC 14 AM 11:46

MAIL ROOM

ORIGINAL

991903-TZ

DEPOSIT

DATE

D219

DEC 14 1999

DOCUMENT NUMBER-DATE

~~15068~~ DEC 14 99

FFSD-RECORDS/REPORTING

STATE OF FLORIDA

Commissioners:
JOE GARCIA, CHAIRMAN
J. TERRY DEASON
SUSAN F. CLARK
E. LEON JACOBS, JR.



DIVISION OF RECORDS & REPORTING
BLANCA S. BAYÓ
DIRECTOR
(850) 413-6770

Public Service Commission

December 15, 1999

Monique Byrnes
Technologies Management, Inc.
Post Office Drawer 200
Winter Park, Florida 32790-0200

Re: Docket No. 991903-TC

Dear Ms. Byrnes:

This will acknowledge receipt of an application for certificate to provide pay telephone service by Paramount International Telecommunications, Inc. d/b/a R Network, which was filed in this office on December 14, 1999 and assigned the above-referenced docket number. Appropriate staff members will be advised.

Mediation may be available to resolve any dispute in this docket. If mediation is conducted, it does not affect a substantially interested person's right to an administrative hearing. For more information, contact the Office of General Counsel at (850) 413-6078 or FAX (850) 413-6079.

Please make notes as well that Commission Rule 25-22.005(7), F.A.C., requires certificated companies to notify the Commission of any changes in name, telephone, address, or contact person. Should your application be granted by the Commission, you will be expected to comply with this rule by advising us of any changes as they occur.

Division of Records and Reporting
Florida Public Service Commission

FLORIDA PUBLIC SERVICE COMMISSION

ORIGINAL

Application Form

For

Certificate to Provide Pay Telephone Service
Within the State of Florida

991903-TC

- A. This form is used for an original application for a certificate to provide pay telephone service within the State of Florida.
- B. A \$100 non-refundable application fee along with the enclosed Applicant Acknowledgement Card must be completed and accompany the Application before processing will begin.
- C. Once a certificate has been granted, regulatory assessment fees will be due for that calendar year regardless of whether or not pay telephones have been installed.
- D. When completing the application, respond to each item. If an item is not applicable, explain why. Failure to respond to any item will result in the application being returned and a delay in the application process.
- E. Use a separate sheet for each answer which will not fit the allotted space.
- F. If you have any questions about completing the form, contact the Certificate Section at 904\488-1280 or write:

Florida Public Service Commission
Division of Communications
101 East Gaines Street
Tallahassee, Florida 32399-0866

- G. Once completed, the original plus five (5) copies of this form, along with \$100 application fee, are to be submitted to:

Florida Public Service Commission
Division of Communications
101 East Gaines Street
Tallahassee, Florida 32399-0866

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

1. LEGAL NAME OF THE APPLICANT

Paramount International Telecommunications, Inc. d/b/a R Network

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

R Network

3. ADDRESS OF THE APPLICANT(S)

STREET 2540 Fortune Way
CITY Vista
STATE & ZIP California 92083

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.

See Attachment I.

NAME NRAI Services, Inc.

ADDRESS 526 East Park Avenue
Tallahassee, FL 32301

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: Frank R. Lewis
TITLE: Director Technical Services
PHONE: (760) 599-1920

6. HAS APPLICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., OR IN THE CASE OF A CLOSELY HELD CORPORATION ANY CHARGE HOLDER OF THE APPLICANT EVER BEEN GRANTED OR DENIED 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 AN LIST THE CERTIFICATE HOLDER AND CERTIFICATE NUMBER.

Not applicable.

8. LIST THE STATES IN WHICH THE APPLICANT:

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE

Paramount International Telecommunications, Inc. d/b/a R Network is currently certified in Tennessee and is undergoing a nationwide certification process.

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

Yes.

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

None.

D. HAS HAD REGULATORY PENALTIES IMPOSED FOR VIOLATIONS OF TELECOMMUNICATIONS STATUTES. EXPLAIN CIRCUMSTANCES.

None.

9. PLEASE CHECK THE SERVICES THAT WILL BE PROVIDED:

- LOCAL
- LONG DISTANCE
- COIN
- CALLING CARD
- CREDIT CARDS
- OTHER, DESCRIBE

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

150-200

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

- PERSONALLY
- FULL-TIME TECHNICIAN
- 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.)

Pay Telephones available to the public will allow the user to access all locally available long distance carriers.

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(4), F.A.C.)

Yes.

I, **Michael Eberle**,

ATTEST TO THE ACCURACY OF THE INFORMATION CONTAINED IN THIS APPLICATION AND HAVE READ ALL THE RULES AND REGULATIONS REGARDING PAY PHONE SERVICE IN FLORIDA. I WILL COMPLY WILL 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.



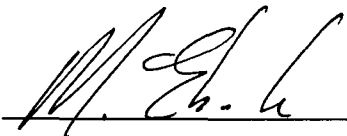
Michael Eberle, CEO & President

DATE: 12.5.99

APPLICANT ACKNOWLEDGEMENT CARD

Applicant: Paramount International Telecommunications, Inc.d/b/a R Network

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

Signature: 

Title: CEO & President, Paramount International Telecommunications, Inc. d/b/a R Network

Date: 12-5-99

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.

Attachment I

Paramount International Telecommunications, Inc. d/b/a R Network

Certificate of Authority

to transact business within the State of Florida

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE
STATE OF FLORIDA:*

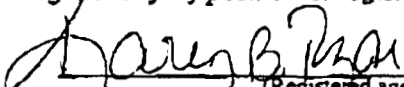
1. PARAMOUNT INTERNATIONAL TELECOMMUNICATIONS, INC.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Nevada 3. 330744597
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. October 18, 1996 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. Suite SUITE A, 2540 FORTUNE WAY
VISTA, CA 92083
(Current mailing address)
To engage in any act or activity for which corporations may be organized.
8. Telecommunication services
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: Corporation Service Company

Office Address: 1201 Hays Street
Tallahassee, Florida, 32301
(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


 Karen B. Rozar, Asst. Sec.
 Corporation Service Company
 (Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
98 AUG 14 AM 10:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA



12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: See attached officers/directors rider

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: See attached officers/directors rider

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

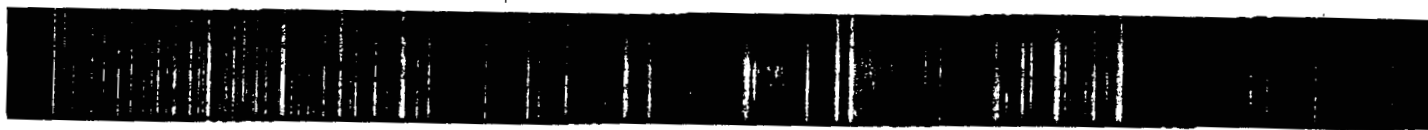
98 AUG 14 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Kay Eberle
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. KAY EBERLE, Secretary
(Typed or printed name and capacity of person signing application)



OFFICERS RIDER

PARAMOUNT INTERNATIONAL
TELECOMMUNICATIONS, INC.

List of Officers

Name: MICHAEL EBERLE Title: PRESIDENT
Bus. Addr.: 1815 S. PACIFIC STREET, OCEANSIDE, CA 92054

Name: DAVID PATON Title: VICE PRESIDENT
Bus. Addr.: 10002 WALDGROVE PLACE, SAN DIEGO, CA 92131

Name: KAY EBERLE Title: SEC/TREAS.
Bus. Addr.: 1815 S. PACIFIC STREET, OCEANSIDE, CA 92054

Name: DAVID MOODY Title: CHAIRMAN OF THE BOARD
Bus. Addr.: 734 PALOMINO ROAD, FALLBROOK, CA 92028

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 AUG 14 AM 10:15

FILED





FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

November 22, 1999

R NETWORK
1295 BANDANA BLVD. N. SUITE 300
ST. PAUL, MN 55108

Subject: **R NETWORK**REGISTRATION NUMBER: **G99326900043**

This will acknowledge the filing of the above fictitious name registration which was registered on November 22, 1999. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between July 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES. Whenever corresponding please provide assigned Registration Number.

Should you have any questions regarding this matter you may contact our office at (850) 488-9000.

/w/

Division of Corporations

Letter No. 099A00055798



RECEIVED
FLORIDA PUBLIC
SERVICE COMMISSION

99 DEC 14 AM 11:46

MAIL ROOM

991903-TZ

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Winter Park, FL
32789

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December 13, 1999

Overnight

Blanca Bayo, Director
Division of Records and Reporting
Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, FL 32399-0870

DEPOSIT

DATE

D 2 1 9

DEC 14 1999

RE: Initial Application for Certificate to Provide Pay Telephone Services within the State of Florida.

Paramount International Telecommunications, Inc. d/b/a R Network

Dear Ms. Bayo:

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Please acknowledge receipt of this filing by returning, filed stamped, the extra copy of this letter in the self-addressed stamped envelope.

I may be reached at (407) 740-8575 with any questions, comments or correspondence regarding this application. Thank you for your assistance.

Sincerely,

DOCUMENT NUMBER DATE
15268 DEC 14 99
RECORDS & REPORTING

TECHNOLOGIES MANAGEMENT, INC.

P.O. BOX 200
WINTER PARK, FL 32790-0200
(407) 740-8575

BANK OF AMERICA
WINTER PARK, FL 32789
63-27/631

24975

12/13/1999

PAY TO THE ORDER OF Florida Public Service Commission

\$ **100.00

One Hundred and 00/100*****

DOLLARS
Security features included. Details on back.

Florida Public Service Commission
Records & Reporting
2540 Shumard Oaks Blvd.
Tallahassee, FL 32302-1500

TECHNOLOGIES
MANAGEMENT, INC.

MEMO Florida Public Service Commission

⑈024975⑈