

**** FLORIDA PUBLIC SERVICE COMMISSION ****

DIVISION OF TELECOMMUNICATIONS
BUREAU OF CERTIFICATION AND SERVICE EVALUATION

APPLICATION FORM
for
AUTHORITY TO PROVIDE
ALTERNATIVE LOCAL EXCHANGE SERVICE
WITHIN THE STATE OF FLORIDA

010786-TX

Instructions

- ◆ This form is used as an application for an original certificate and for approval of the assignment or transfer of an existing certificate. In the case of an assignment or transfer, the information provided shall be for the assignee or transferee (See Appendix A).
- ◆ Print or type all responses to each item requested in the application and appendices. If an item is not applicable, please explain why.
- ◆ Use a separate sheet for each answer which will not fit the allotted space.
- ◆ Once completed, submit the original and six (6) copies of this form along with a non-refundable application fee of **\$250.00** to:

Florida Public Service Commission
Division of Records and Reporting
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850
(850) 413-6770

- ◆ If you have questions about completing the form, contact:

Florida Public Service Commission
Division of Telecommunications
Bureau of Certification and Service Evaluation
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850
(850) 413-6600

APPLICATION

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

Original certificate (new company).

Approval of transfer of existing certificate: Example, a non-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 approve the new controlling entity.

2. Name of company:

US Telecom Services inc.

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

US Telecom Services inc.

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

PO Box 1068

St. Petersburg, FL 33731-1068

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

PO Box 1068

St. Petersburg, FL 33731-1068

6. Structure of organization:

- () Individual Corporation
() Foreign Corporation () Foreign Partnership
() General Partnership () Limited Partnership
() Other _____

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:

59-3708220

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

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

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:

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

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

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:** _____

14. Provide **F.E.I. Number**(if applicable): _____

15. Indicate if any of the officers, directors, 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.

Jonathan Mayz - had business with 3 partners in 1998
when we started to have difficulty all partners left J. Mayz
with all debt accumulated.

(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.

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

(a) The application:

Name: JONATHAN S. MAGRO

Title: President

Address: 1719 Montana Ave NE

City/State/Zip: St. Pete, FL 33703

Telephone No.: 727-520-7639 Fax No.: 727-520-7649

Internet E-Mail Address: Jmagro@compabay.com

Internet Website Address: _____

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

Name: JONATHAN S. MAGRO

Title: AS Above

Address: _____

City/State/Zip: _____

Telephone No.: _____ Fax No.: _____

Internet E-Mail Address: _____

Internet Website Address: _____

(c) Complaints/Inquiries from customers:

Name: Elizabeth Hacker

Title: Customer Service Manager

Address: 1719 Martina Ave NE.

City/State/Zip: St. Pete, FL 33703

Telephone No.: 25-455-8883 Fax No.: _____

Internet E-Mail Address: _____

Internet Website Address: _____

17. List the states in which the applicant:

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

None

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

None

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

None

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

None

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

None

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

None

18. 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.*

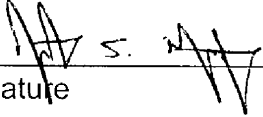
Further, the following (which includes supporting documentation) should be provided:

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

**** APPLICANT ACKNOWLEDGMENT 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		Date	5/23/01
Title	President	Telephone No.	727-215-8795
Address:	1719 Montana Ave N2	Fax No.	727-520-7649
	St. Pete, FL 33703		

ATTACHMENTS:

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

CERTIFICATE SALE, TRANSFER, OR ASSIGNMENT STATEMENT

I, (Name) _____,

(Title) _____ of (Name of Company)

_____ and current holder of Florida Public Service Commission Certificate Number # _____

_____, have reviewed this application and join in the petitioner's request for a:

- () sale
- () transfer
- () assignment

of the above-mentioned certificate.

UTILITY OFFICIAL:

Signature _____ Date _____

Title _____ Telephone No. _____

Address: _____ Fax No. _____

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.

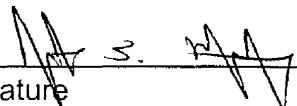
<u>POP-to-POP</u>	<u>OWNERSHIP</u>
1) _____	_____
2) _____	_____
3) _____	_____
4) _____	_____

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:

Signature	<u></u>	Date	<u>5/23/01</u>
Title	<u>President</u>	Telephone No.	<u>727-215-8795</u>
Address:	<u>1719 Montana Ave NE</u>	Fax No.	<u>727-520-7649</u>
	<u>St. Pete, FL 33703</u>		



US Telecom Services, Inc.
PO Box 1068
Saint Petersburg, FL
33731-1068

Financial, Managerial, and Technical Capability

The following answers are in response to page 7 & 8 of ALEC application.

18.

A. Financial Capability (see attached forecast sheet)

1. I Jonathan S. Magro for US Telecom Services, Inc. have sufficient financial capability to provide the requested service in the geographic area proposed to be served.
2. I Jonathan S. Magro for US Telecom Services, Inc. have sufficient financial capability to maintain the requested service.
3. I Jonathan S. Magro for US Telecom Services, Inc. have sufficient financial capability to meet any and all lease or ownership obligations.

B. Managerial Capability

I Jonathan S. Magro for US Telecom Services, Inc. have the managerial capability to run and operate a successful business. I have been President of Money Managers, Inc. since March 1999.

C. Technical Capability

US Telecom Services, Inc. has the technical ability to receive and credit all payments in a timely manner. Also, US Telecom will be able to provide customer support for any questions regarding phone service, and optional services available to our customers.



US Telecom Services, Inc.
PO Box 1068
Saint Petersburg, FL
33731-1068

Business Forecast Explanation

1.1 Opening Balance

Opening Balance.....\$10,000.00

2.1 Company Growth

.1 1st Quarter

- .A Customer's @ 33.33/month.....99.99 customer's
- .B Average Bill/month.....\$40.00
- .C Sales @ \$1333.20/month.....\$3,999.60

.2 2nd Quarter

Estimated growth of 20% / month

- .A Customer's @ 39.99/month.....119.97 customer's
- .B Average Bill/month.....\$40.00
- .C Sales @ \$1599.60/month.....\$4798.80

.3 3rd Quarter

Estimated growth of 20% / month

- .A Customer's @ 47.99/month.....143.97 customer's
- .B Average Bill/month.....\$40.00
- .C Sales @ \$1919.60/month.....\$5758.80

.4 4th Quarter

Estimated growth of 20% / month

- .A Customer's @ 57.59/month.....172.77 customer's
- .B Average Bill/month.....\$40.00
- .C Sales @ \$2303.60/month.....\$6910.80

**Quarterly Business Forecast
US Telecom Services, Inc.**

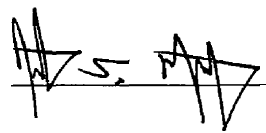
Fiscal Year:

RESOURCES	Quarter 1st		Quarter 2nd		Quarter 3rd		Quarter 4th		Year's Total	
	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL
Opening Balance	10,000.00		11,099.64	0.00	12,918.64	0.00	15,601.56	0.00		
Receipts from Sales	3,999.60		4,798.80		5,758.80		6,910.80		21,468.00	
Other Receivables										
Total Cash Resources	13,999.60	0.00	15,898.44	0.00	18,677.44	0.00	22,512.36	0.00		0.00

DISBURSEMENTS										
	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL
Payroll	2,000.00		2,000.00		2,000.00		2,000.00		8,000.00	
Capital Expense	0.00									
Noncapital Expense	0.00									
Loan Payments	0.00									
Taxes	399.96		479.80		575.88		691.08		2,146.72	
Other	500.00		500.00		500.00		500.00		2,000.00	
Total Disbursements	2,899.96	0.00	2,979.80	0.00	3,075.88	0.00	3,191.08	0.00	12,146.72	0.00

SUMMARY										
	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL	ESTIMATED	ACTUAL
Net Cash Flow	1,099.64	0.00	1,819.00	0.00	2,682.92	0.00	3,719.72	0.00	9,321.28	0.00
Ending Balance	11,099.64	0.00	12,918.64	0.00	15,601.56	0.00	19,321.28	0.00		0.00
Less Minimum Balance										
Cash Available	11,099.64	0.00	12,918.64	0.00	15,601.56	0.00	19,321.28	0.00		0.00

Prepared by: Jonathan S. Magro	Approved by: Jonathan S. Magro
Date: 5/23/01	Date: 5/23/01



TITLE SHEET

FLORIDA TELECOMMUNICATION PRICE LIST

This price list contains the descriptions, regulations, and rates applicable to the furnishing of service and facilities for alternative local exchange telecommunications services provided by US Telecom Services, Inc., with principle offices at PO Box 1068 Saint Petersburg, FL 33731-1068. This price list is on file with the Florida Public Service Commission, and copies may be inspected, during normal business hours, at the Company's principal place of business.

ISSUED: May 22, 2001

Effective: _____

BY:

Jonathan S. Magro
PO Box 1068
Saint Petersburg, FL 33731-1068

CHECK SHEET

The sheets listed below, which are inclusive of this price list, are effective as of the date shown at the bottom of the respective sheet(s). Original and revised sheets as named below comprise all changes from the original price list and are currently in effect as of the date of the bottom of this page.

SHEET	REVISION
1	Original
2	Original
3	Original
4	Original
5	Original
6	Original
7	Original
8	Original
9	Original
10	Original
11	Original

ISSUED: May 22, 2001

Effective: _____

BY:

Jonathan S. Magro
PO Box 1068
Saint Petersburg, FL 33731-1068

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Section 4 – Miscellaneous Services.....11

ISSUED: May 22, 2001

Effective: _____

BY:

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PO Box 1068
Saint Petersburg, FL 33731-1068

SYMBOLS SHEET

The following are the only symbols used for the purposes indicated below:

D - Delete Or Discontinue

I - Change Resulting In An Increase To A Customer's Bill

M - Moved From Another Price List Location

N - New

R - Change Resulting In A Reduction To A Customer's Bill

T - Change In Text Or Regulation But No Change In Rate Or Charge

ISSUED: May 22, 2001

Effective: _____

BY:

Jonathan S. Magro
PO Box 1068
Saint Petersburg, FL 33731-1068

PRICE LIST FORMAT SHEETS

A. Sheet Numbering - Sheet numbers appear in the upper right corner of the page. Sheets are numbered sequentially. However, new sheets are occasionally added to the price list. When a new sheet is added between sheets already in effect, a decimal is added. For example, a new sheet added between sheets 14 and 15 would be 14.1.

B. Sheet Revision Numbers - Revision numbers also appear in the upper right corner of each page. These numbers are used to determine the most current sheet version on file with the FPFC. For example, the 4th revised sheet 14 cancels the 3rd revised sheet 14. Because of various suspension perils, deferrals, etc, the FPFC follows in their price list approval process, the most current sheet number on file with the Commission is not always the price list page in effect. Consult the Check Sheet forth sheet currently in effect.

C. Paragraph Numbering Sequence - There are nine levels of paragraph coding. Each level of coding is subservient to its next higher level :

2.
2.1.
2.1.1.
2.1.1.A.
2.1.1.A.1.
2.1.1.A.1.(a).
2.1.1.A.1.(a).I.
2.1.1.A.1.(a).I.(I).
2.1.1.A.1.(a).I.(I).(1).

D. Check Sheets - When a price list filing is made with the FPFC, an updated check sheet accompanies the price list filing. The check sheet lists the sheets contained in the price list, with a cross reference to the current revision number. When new pages are added, the check sheet is changed to reflect the revision. All revisions made in a given filing are designated by an asterisk (*). There will be no other symbols used on this page if these are the only changes made to it (i.e., the format, etc. remains the same, just revised revision levels on some pages). The price list user should refer to the latest check sheet to find out if a particular sheet is the most current on file with the FPFC.

ISSUED: May 22, 2001

Effective: _____

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SECTION 1 - TECHNICAL TERMS AND ABBREVIATIONS

Access Line - An arrangement that connects the customer's location to the Company's network switching center.

Authorization Code - A numerical code, one or more of which are available to a customer to enable him/her to access the carrier, and which are used by the carrier both to prevent unauthorized access to its facilities and to identify the customer for billing purposes.

Company or Carrier - US Telecom Services, Inc.

Customer - The person, firm, corporation or other entity which orders service and is responsible for payment of charges due and compliance with the Company's tariff regulations.

Exchange - The entire telephone plant and facilities used in providing telephone service to subscribers located in an exchange area.

Holidays - The Company recognized holidays are New Year's Day, Independence Day, Labor Day, Thanksgiving, Easter, Christmas Eve and Christmas Day

Intra-Lata Toll Messages - Those toll messages, which originate and terminate within the same LATA

Message - A completed telephone call.

ISSUED: May 22, 2001

Effective: _____

BY:

Jonathan S. Magro
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SECTION 2 - RULES AND REGULATIONS

2.1 Description of Service

US Telecom Services, Inc. is a reseller of local exchange services as set forth in this price list.

2.2 Undertaking of the Carrier

.1 The services of the Carrier will be available as soon as practicable after receipt of an order for service between any and all points of the carrier's system and to all other points beyond carrier's system through arrangements with other carriers.

.2 The obligation of the Carrier to provide service is dependent upon its ability to procure facilities which are required to meet the Subscriber's order for service. The Carrier will make all reasonable efforts to secure the necessary facilities.

2.3 Liabilities of the Company

.1 The Company and or its dealers will be held "harmless" against claims or damages that arise from accidental disconnect, including but not limited to any inability to access 911.

2.4 Interruption of Service

.1 Non-Payment of Regulated Charges on a specified date, as agreed, will result in a disconnection of service. Any reconnection of that service, would involve an additional charge of \$25.00 for the activation plus the first month's service charge.

ISSUED: May 22, 2001

Effective: _____

BY:

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Saint Petersburg, FL 33731-1068

SECTION 2 – RULES AND REGULATIONS

2.5 Customer Payment

- .1 The first month's payment will be required when the customer submits his/her application. The customer's billing cycle will be reflected when the service is activated.
- .2 All applicable taxes will be included in the customer's monthly billing.
- .3 A customer will be in default unless payment is made on or before the due date. A grace period of 5 days past the due date will be extended to all customers. If payment is not made by this grace period, a late payment charge of 1.5% of the total bill will be applied.
- .4 A \$29.00 fee will be assessed for all checks returned by the customer's bank.

2.6 Refunds

- .1 A request for a refund on any activation will only be given if the customer's phone service was not turned on within the period that was originally promised. A refund for any other reason must be submitted in writing by the customer and mailed to US Telecom Services, Inc. The request for refund will be reviewed and the customer will either receive a credit or an explanation as to why no credit is due. This notification will be sent to the customer within the 30 days of receipt of the actual request.

ISSUED: May 22, 2001

Effective: _____

BY:

Jonathan S. Magro
PO Box 1068
Saint Petersburg, FL 33731-1068

SECTION 3 – BASIC SERVICE DESCRIPTION AND RATES

3.1 Service Description

Prepaid local phone service with 911 access, operator services and relay services.
Service does not include an extended calling area or long distance.

3.2 Rates

.1 Recurring Charges

.A Local Residential charge.....\$35.00 per month

.2 Non-Recurring Charges

.A Conversion Charge

This charge is applied to existing Local Exchange Carrier lines converted to the Carrier's service. All such lines will retain their current Local Exchange Carrier assigned telephone numbers.

First Line.....\$10.00
Each Additional Line.....\$10.00

.B New Line Installation Charge

First Line.....\$35.00
Each Additional Line.....\$10.00

ISSUED: May 22, 2001

Effective: _____

BY:

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SECTION 3- BASIC SERVICE DESCRIPTION AND RATES

3.3 Hearing and Speech Impaired Customers

.1 Directory Assistance

There shall be no charge for up to fifty calls per billing cycle from lines or trunks serving individuals with disabilities. The Company shall charge the prevailing price list rates for every call in excess of fifty within a billing cycle.

.2 Telecommunications Relay Service

For calls received from the relay service, the Company will - when billing relay calls discount relay service calls by 50 percent off of the otherwise applicable rate for a voice non-relay call except that where either the calling or called party indicates that either party is both hearing and visually impaired, the call shall be discounted 60 percent off of their otherwise applicable rate for a voice non-relay call.

ISSUED: May 22, 2001

Effective: _____

BY:

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SECTION 4 – MISCELLANEOUS SERVICES

4.1 Optional Services

A Customer may order the following optional services at the Monthly Recurring Charge specified below. Non-Recurring installation charges will be applied to all orders for optional services submitted subsequent to initial service installation.

- Installation of Optional Services per line.....\$10.00
- .1 Caller ID.....\$12.00
- .2 Call Return.....\$ 6.00
- .3 Call Waiting.....\$ 6.00
- .4 3 -Way Calling.....\$ 6.00
- .5 Non- Published Number.....\$ 6.00
- .6 Call Forwarding.....\$ 6.00

4.2 Directory Listings

- .1 Initial White Pages Listing.....N/C
- .2 Non-Published Number, per line.....\$ 2.35
- .3 Non-Listed Number, per line.....\$ 1.00
- .4 Additional Listing, per listing.....\$ 1.25

4.3 Non-Routine Installation and / or Maintenance

At the Customer’s request, installation and/or maintenance may be performed outside the Company’s regular business hours, or (in the Company’s sole discretion and subject to any conditions it may impose) in hazardous locations. In such cases, charges based on the cost of labor, material and other costs incurred by or charged to the Company will apply. If installation is started during regular business hours but, at the Customer’s request, extends beyond regular business hours into time periods including, but not limited to, weekends, holidays, and/or night hours, additional charges may apply.

ISSUED: May 22, 2001

Effective: _____

BY:

Jonathan S. Magro
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