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477 JUL - 7 2004

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

040638-TC

**DIVISION OF COMPETITIVE MARKETS AND ENFORCEMENT
CERTIFICATION**

**APPLICATION FORM FOR CERTIFICATE TO PROVIDE
PAY TELEPHONE SERVICE
WITHIN THE STATE OF FLORIDA**

RECEIVED-FPSC
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COMMISSION
CLERK

Instructions

- ◆ This form is used as an application for an original certificate to provide pay telephone service within the State of Florida.
- ◆ Print or type all responses to each item requested in the application. If an item is not applicable, please explain. Pages 8, 9 and 10 must be completed and signed.
- ◆ Use a separate sheet for each answer which will not fit within the allotted space.
- ◆ Once completed, submit the original and two (2) copies of this form and a non-refundable application fee of \$100.00 to:

**Florida Public Service Commission
Division of the Commission Clerk and Administrative Services
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850
(850) 413-6770**

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COMM. CLERK SERVICES

- CMP _____
- COM _____
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- RCA _____
- SCR _____
- SEC 1
- OTH _____

If you have questions about completing the form, contact:

**Florida Public Service Commission
Division of Competitive Markets and Enforcement
Certification
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850
(850) 413-6600**

Form PSC/CMU-32 (02/99)
Required by Commission Rule Nos. 25-24.510 & 25-24.511
File Name: cmu-32.doc

DOCUMENT NUMBER-DATE

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FPSC-COMMISSION CLERK

1. Name of company or name of individual (not fictitious name or d/b/a):
Holiday Inn Express

2. Name under which applicant will do business (fictitious name, etc.):
Scala Hotel Group LLC

3. Official mailing address:
Street: 10826 US 19 N
P.O. Box: _____
City: Port Richey
State: FL Zip: 34668

4. Florida address:
Street: SAME AS ABOVE
P.O. Box: _____
City: _____
State: _____ Zip: _____

5. Structure of organization:
 Individual
 Corporation
 General Partnership
 Limited Partnership
 Other: _____

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

Florida Secretary of State
Corporate Registration Number: _____