

## IXC REGISTRATION FORM

(Please see attached supplement.)

Company Name	<u>Comtel Telecom Assets LP d/b/a VarTec Solutions</u>
Florida Secretary of State Registration No.	<u>Not Yet Available</u>
Fictitious Name(s) as filed at Fla. Sec. of State	<u>Not Yet Available</u>
<hr/>	
Company Mailing Name	<u>Comtel Telecom Assets LP</u>
Mailing Address	<u>500 Boylston Street, 17<sup>th</sup> Floor</u>
	<u>Boston, Massachusetts 02116</u>
Web Address	<u>www.vartecsolutions.net (Upon consummation of the transaction described in the supplement)</u>
E-mail Address	<u>leeann.wilson@sowood.com (Lee Ann Wilson, Assistant Secretary)</u>
Physical Address	<u>500 Boylston Street, 17<sup>th</sup> Floor</u>
	<u>Boston, Massachusetts 02116</u>
	<u>Becky Gipson*</u>
Company Liaison	
Title	<u>Director, Regulatory Affairs</u>
Phone	<u>(972) 478-3309</u>
Fax	<u>(972) 478-3310</u>
E-mail address	<u>bgipson@vartec.net</u>
	<u>Becky Gipson*</u>
Consumer Liaison to PSC	
Title	<u>Director, Regulatory Affairs</u>
Address	<u>2440 Marsh Lane, Carrollton, Texas 75006</u>
Phone	<u>(972) 478-3309</u>
Fax	<u>(972) 478-3310</u>
E-mail address	<u>bgipson@vartec.net</u>

\* Anticipated Liaison

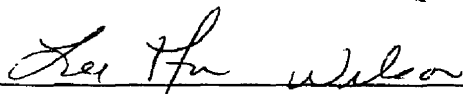
My company will fulfill its tariff requirements as required in Section 364.04, Florida Statutes, at a later date by providing name/address stickers in conjunction with the consummation of the transaction described in the attachments. I understand that my company must notify the Commission of any changes to the above

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information pursuant to Section 364.02, Florida Statutes. My company will owe Regulatory Assessment Fees for each year or partial year my registration is active pursuant to Section 364.336, Florida Statutes. My company will comply with Section 364.603, Florida Statutes, concerning carrier selection requirements, and Section 364.604, Florida Statutes, concerning billing practices.

  
Signature of Company Representative  
Date 10/4/05

Lee Ann Wilson  
Printed/Typed Name of Representative  
Effective: 07/15/2003