

TransWorld Network Corp.

7702 Woodland Center Boulevard, Suite 50 Tampa, Florida 33614

Telephone (813) 890-2200 1-809-253-0665 Fax (813) 890-2712

T.R.A. DON'TET ROOM T.R.A. DOUNET ROOM

December 31, 2003

TN Regulatory Authority

ATTN: Deborah Taylor Tate, Chairman-

460 James Robertson Parkway

Nashville, TN 37243

04-00001

RE: TransWorld Network, Corp's Application for Authority as a Telecommunications Reseller

Ms. Tate:

Enclosed please find for filing an original and 13 copies of TransWorld Network, Corp's Application for Authority as a telecommunications reseller, with all required attachments and \$50 filing fee.

Please note that the Company requests confidential handling of the financial statements submitted as part of its application. The statements have been filed under seal as Exhibit 6.

I have also enclosed an extra copy of this letter to be date stamped and returned to me in the enclosed, self-addressed, postage paid envelope. If you have any questions, or if I may provide you with additional information, please do not hesitate to contact me. I can be reached at (813) 890-2207 from 8:30am to 5:30pm EST.

Respectfully submitted,

Soundes V

Lourdes Viñas

Director, Regulatory & Compliance

Enclosures

TELE MARKET CONTRACTOR

APPLICATION FOR CERTIFICATE TO PROVIDE OPERATOR SERVICES AND/OR RESELL TELECOMMUNICATION SERVICES IN TENNESSEE SECTION A

Application is hereby made for a certificate of authority pursuant to TRA Rule 1220-4-2-.57 to provide telecommunications services in the State of Tennessee.

Part I	: General Informat	ion				
A. made.	Name of Applicar	Full exact name	SWORLD NET	WORK, CORP artnership, sole proprietorship, or oth	er entity, for which applica	ition is
		Legal name of	f applicant, if different from	above.		
		7702 Address	WOODLAND CEN	ITER BLVD, STE 50 City State	TAMPA, FL	33614-2411
	Tenn. Secretary of	of State Cert	tificate of Authority	/ID <u>0263093</u>		
	Federal Taxpayer	ID Number	r <u>41-1633893</u>			
	Social Security No Applying as Indivi Any trade name(s		•	ous name(s) used by app	olicant:	
	N/A					
	licant has affiliate(s sted information for			mmunications services, or the applicant.		
	Address		***************************************	City		
	State(Us	Zip Code se additiona	Phone No al pages if necessa	o. () ary)		
***IMF	PORTANT INFORM		e(s) or narent	company, or consti	tuency corporat	ions
	engaged in prov name, assumed requested infor	iding teleco name or fic mation on	ommunications s ctitious name use all parts of this	ervices, or operating ted by the above, provides application as well himent, if necessary.	inder any trade le the above	
		THIS	SECTION FOR TRA	USE ONLY		
Docket	Number. <u>04 - 00</u>	<u> </u>	Dat	mpany ID Number/ te Approvedaluator	269	

В.	Describe other businesses or business transactions, if any, at the same location as the principal business address: NIA				
C.	Provide the name, business and home address employment history and business experience of SEE ATTACHMENTS	over the preceding eight years of:			
V	stock association or a corporation. (Note: If the or a subsidiary of such a corporation it does not	nership; ich Key Stockholder if the applicant is a joint e applicant is a publicly traded corporation it need to provide this information) introl over or direction of, the business of the			
	nation to be included:				
HOME	TITLE NESS ADDRESS E ADDRESS OYMENT HISTORY	PHONE No. PHONE No.			
	Provide the above requested information or	separate attachments.			
D.		(5%) more shareholders or beneficiaries (of a authority to transact business was denied,			
E.	SEE ATTACHMENTS Has the Tennessee Regulatory Authority, or ar federal agency or any agency of any other state against the applicant or any of its parent compact. LC members, directors, officers, five percent (trust)?	e ever initiated a regulatory action or order anies, subsidiaries, affiliates, owners, partners			
	partners, LLC members, directors, officers, five beneficiaries (of a trust), been enjoined or restr	ompanies, subsidiaries, affiliates, owners, e percent (5%) more shareholders or ained by order by any court or state or federal			
	regulatory or law enforcement entity from enga telecommunications business?Yes _				
F.	Has the applicant or any of its parent companie LLC members, directors, officers, five percent (trust) been associated with a business who has services in any state, describe the circumstance	(5%) more shareholders or beneficiaries (of a sceased providing telecommunications es. (Use additional pages if necessary)			
	YES, TN. In August 2000, had no customers (Withdrew from TRI	Company withdrew as it in TN at the time.			
	(Withdrew from TR	4)			
	<u> </u>				

G.	Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, L.L.C. members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been convicted of any crime or crimes, or charged in court with any fraudulent or dishonest acts in any transaction of any kind, or confined in any penal institution? If so, list such persons, give details, state results and final outcome. (Use additional pages if necessary)
	(1) Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, L.L.C. members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been indicted, convicted, pled guilty or pled nolo contendre to a felony in Tennessee or elsewhere? YESXNO
H.	Name and telephone number of contact person authorized to respond to Authority inquiries regarding company operations Monday through Friday.
	Lourdes VINAS (8/3)890 - 2207 (8/3)890 - 27/12 Name Phone No. Fax No.
	(800) 253-065 x2207 e-mail Address compliance@epowerc.com
	(1) Name and telephone number of contact person authorized to respond to Authority inquiries regarding this filing Monday through Friday.
	Lourdes Viñas (8/3)890 - 2207 (8/3)890 - 2712 Name Phone No. Fax No.
	(800) 263-0665 x2207 e-mail Address compliance@epowerc.com
1.	List a toll-free telephone number and mailing address that consumers can call or write to report service problems and/or request refunds or adjustments.
	1-800-950-3015 PHONE NUMBER ALTERNATE PHONE NUMBER
	7102 WODDLAND CENTER BLYD, STE 50 TAMPA, FL 33614-2411 ATTN: CUSTOMER SERVICE
(J)	Provide the name and address of the registered agent for service of process:
	CT CORPORATION SYSTEM
	CT CORPORATION SYSTEM 530 GAY ST KNOXVILLE, TN 37902
(K)	Identify all authorized agents in the state, if any by name, address, business and home phone numbers and any other businesses conducted by the agent at the same location: (use additional sheets if necessary) See ATTRCHMENTS
Part II A.	Check the type of telecommunication services you plan to provide in Tennessee. X Resell Interexchange long distance services Operator Services Resell local services Other (describe)
B.	If providing operator services, list company name, address and contact person for all reseller carriers you serve in Tennessee. Provide the above information on Appendix I. NIA, Company does not provide operator Services.

,	For the above states, list the number and types of complaint(s) filed against applicant, the complaint(s)' current status. Provide this information on a separate attachment, if necessary.
	If applicant has affiliate(s) or parent company, or constituency corporations, engaged in providing telecommunications services, or operating under any trade name, assumed name or fictitious name used by the above, provide the above requested information for all as well as for the applicant. Provide this informatio on a separate attachment, if necessary.
	List any states that the applicant or any affiliate, parent company, or constituency corporation operating under any trade name, assumed name, or fictitious name, has been denied authority to provide service. (Use additional pages if necessary) NONE
	Areas in Tonnesses to be served
	Areas in Tennessee to be served. STATE WIDE
	What type of customers will the applicant serve? a. Business/_ b. Residential/_ c. Aggregators (e.g. Hotels, Payphones) d. Other (specify)
	Does the applicant allow a property imposed fee (PIF) to be added to the price of intrastate telephone calls over its network? If yes, specify amount
	Are your prices for intrastate services plus any PIF equal to or less than the dominant carriers' price for similar services? YesKNo
	Describe the type of services and price that the applicant will be offering in Tennessee the Informational Tariff Form found in Appendix II ¹ .
	What is the applicant's 10XXX or 800 access code, if applicable? _N/A
	Does the applicant now have or plan to have any telecommunication's facilities

¹Applicant is required to fill out an Informational Tariff form. Failure to fill out this form will cause the applicant's request to be rejected.

L	Whose facility-b	pased netwo	ork(s) will the a	pplicant be re	selling?	·			
	GLOBAL	CROSSIN	ug, Qwes	T Commu	NICAT	TONS, W	ILTEL COMM	NUNICATIONS	
M	Will the application	nt be utilizin ctly²? <u>Di</u>	g the local telep	ohone compar	ny's billi	ng system	or billing		
N	Describe briefly	how the ap	plicant plans to	market their s	services	in Tennes	ssee?		
			RS WILL N	-					
	CUSTOMER	BASE(S)	ADVERTISIN	S TRANSL	DORLID	NETWORK	GRP'S		
0	SERVICE If independent to phone number a					act person	, address		
	COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE		
	COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE		
	COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE		
	COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE		
Р /	Describe the me preferred interexinterexchange s company guidel A. Company will Services to use of the Change of the Completed of the Change of the Completed of the Change of the Completed of the Change of the Change of the Completed of the Completed of the Change of the Completed of the Change of the Change of the Completed of the Change of the Completed of the Change of the C	exchange selection. Use service. Use service was required by the Cut service.	vice, and to pre additional page copies. Lly Submit m Carrier d est. Signed LIA Stamer pao Company McC	event unauthors if necessary for submission 3rd part or 3rd part or to Submission of submission	rized sv y. If you switch sign to ty voic itting	vitching of he have writh the worker the wor	a consumer's ten procedures hereschung y's LEC + p Cations be y to chap PICC freeze	s s or	w.
Q.	Applicant has the consumer has s	ne ability and	agrees to non	or the form of	call blo	cking that	tne		
R	Applicant gives a periodic samp audit the reselle rates. Yes X	ole of the reser's rates to	eller's intrastat	e toll calls. Th	ne purpo	ose of this	analysis is to		

[✓] A copy of a bill is required if the applicant is going to bill the customer directly.

Part III: Organization Structure

A.	Applic	cant's organizational structure	e			
	X_	Corporation				
		Publicly Traded C	orporation			
		Subsidiary of a Pu	ablicly Traded Corporation			
		Limited Liability C	Corporation Attach a copy of the articles of organization and operating agreement along with amendments.			
		X Other Form of Co	rporation			
		List type <u>C Corporal</u> Attach a copy of the charter, bylaw	(Example S Corporation) s and/or certificate of incorporation.			
	400	_Association	Attach a copy of the charter, bylaws and/or certificate of incorporation and Letter of Authorization from Tennessee Secretary of State			
	***************************************	Joint Stock Association	Attach a copy of the charter, bylaws and/or certificate of incorporation. and Letter of Authorization from Tennessee Secretary of State.			
		_ Trust	Attach a copy of the trust agreement and Letter of Authorization from Tennessee Secretary of State.			
	1	_Individual	Attach a copy of the Letter of Authorization from Tennessee Secretary o State			
SEC	TION (a)	-(g) is to be completed if an	oplicant is a Corporation Association or Trust			
	(a) The date and state of formation/incorporation: 12 21 1988					
		(1) Parent Company, if app	licable PCC HOLDINGS, INC			
	(b)	Attach a certificate of good standing from the state in which the applicant was incorporated/formed.				
			cation of Authority issued by Tennessee Secretary of State prity to engage in business in Tennessee.			
	(d)	Describe the corporate structure of the applicant, including the identity of any				
	is pub	parent or subsidiary of the applicant. Disclose whether any parent or subsidiary ublicly traded on any stock exchange.				
	(e)	Provide the history of material litigation and criminal convictions of every current director, executive officer, or key shareholder of the applicant for the ten-year period prior to the date of this application.				
	(f)	If applicable, attach a copy of thereto:	of the instrument creating the trust and all amendments			
3.		Proprietorship				
		Partnership				

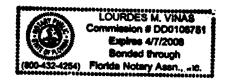
		General	Attach a copy of the partnership agreement along with any amendments.
	-	Limited	Attach a copy of the certificate of limited partnership and the partnership agreement along with any amendments.
	-	Other (E	xplain on separate sheet)
All of	the abo	ve will be required	to submit a valid business license.
	(a)		e and date of the applicant's qualifications to provide ions services in this state.
	(b)	proprietorship, o	e, social security number and address of the owners, if a sole or all partners identifying the percentage of ownership: TIONAL PAGES AS NECESSARY
C.	Numb	er of employees:	<u>75-100</u> .
	Emplo	yer Identification	Number (E.I.N.) 41-1633893
Part I\	/: Fina	ncial Information	
A.	Addre	ss where busines	s records are kept: <u>1702 Woodland Center Blvd, Ste</u> 50
10	mpa		s records are kept: 1702 Woodland Center Blvd, Ste 50 FL 33614 Street 8/3-890-2200 STATE ZIP CODE PHONE NUMBER
CIT	Υ′		STATE ZIP CODE PHONE NUMBER
B.	statem financi or 106	nents for the immitial condition, incluing filed by your	plicant's most recent unconsolidated and consolidated audited financial ediately preceding three-year period. Provide in detail the applicant's iding balance sheet and income statement, or a copy of IRS form 1120 business for the previous year. Attach, if available, a copy of your stockholder reports.
	(1)	Fiscal year end:	Month <u>December</u> Day <u>31</u>
	(2)	December	ent audited, unconsolidated financial statement of Applicant:
	(3)	If applicable, na	me and address of independent certified public accountant:
		KIRKLAND,	Russ, Murphy, & TAPP
		13577 FEA	THER SOUND DR, STE 400 CLEARWATER, FL 33762-5539
	(4)		by financial statement attached: 12/31/2002
C.	Does t	he applicant curre	ently have an internal auditor and/or internal audit program? <u>No</u>
	If so, N	Name of internal	auditor
D.	ten-ye litigatio a pers	ar period prior to on that, according on's financial hea	nistory of applicant's material litigation and criminal convictions for the the date this application is made. Material litigation is defined as any to generally accepted accounting principles, is deemed significant to lith and would be required to be referenced in annual audited financial hareholders or similar documents.

For Individual and Partners:		
Signature		Signature
PRINTED NAME		PRINTED NAME
Signature		Signature
PRINTED NAME		PRINTED NAME
For Corporations and Other Organizations	BY:	TRANS WORLD NETWORK, CORP (NAME OF CORPORATION) SIGNATURE COLIN WOOD
	ATTEST:	PRINTED NAME CEO Title Juliu Lojas
OF FLORIDA y OF HILLS BOROUGH		Title
On this the 30 th Colin Wood	day of <u>\</u>	<u>December</u> . <u>2003</u> before me, a Notary Publi

known to me to be the person(s) named in, and who executed the foregoing application, being duly sworn according to law, deposes and says that the statements and representations set forth in the above application are true and correct to the best of his/her knowledge and belief.

Sandes 4K Viras

seal



Part VI: Rule Compliance Agreement

✓	A.	Attach a copy of a Small and Minority-Owned Telecommunications Business Participation Plan Pursuant to Tennessee Code Annotated § 65-5-212.
	B.	Have you read and understand the Tennessee Regulatory Authority's (TRA) Rules and Regulations for Resellers, 1220-4-2 located at the TRA's website http://www.state.tn.us/tra electronic fileroom in its entirety?
	C.	Do you understand the penalties for non-compliance, and all associated fees to provide such service?YesNo

Mail the completed application and a check for \$50.00 to: Tennessee Regulatory Authority, P.O. Box 198907, Nashville, TN 37219-8907. Should you have any questions, call (615) 741-7489, ext. 163.

The Reseller or Operator Service Provider applicant, hereby, affirms the following:

Will comply with the TRA Reseller Rules and all other applicable Authority Rules and state laws, including T.C.A. Section 65-5-206 located at the TRA's website http://www.state.tn.us/tra electronic fileroom under the External Site of Lexis Law Publishing.

Having been duly sworn, and under the penalties of perjury, I hereby certify that the representations in this RESELLER APPLICATION and all attachments and appendices are true and correct to the best of my knowledge and belief. I further understand that omissions or inaccuracies may result in denial of the APPLICATION and grounds for revocation of Certificate of Authority.



TEST ACCOUNT ADDRESS1 CITY, ST ZIPCODE

BILLING DATE	INVOICE NUMBER
December 1, 2003	3335738
BILL DUE DATE	ACCOUNT NUMBER
December 31, 2003	8134174450-0001

Please make checks payable to: TransWorld Network, Corp. 7702 Woodland Center Blvd, Suite 50 Tampa, FL 33614





PLEASE TEAR ALONG PERFORATION AND REMIT WITH PAYMENT



"Your Cooperative Connection"

TEST ACCOUNT ADDRESS1 CITY, ST ZIPCODE

BILLING DATE	INVOICE NUMBER
December 1, 2003	3335738
BILL DUE DATE	ACCOUNT NUMBER
December 31, 2003	8134174450-0001

For customer service, call toll free 1-800-950-3015 or e-mail us at customersvc@twncorp.com
Hours: Mon-Fri 8:00am-8:00pm, Sat 8:30am-5:00pm (EST)

Page No. 1

Payment record:

AMOUNT PAID	DATE PAID	CHECK	NUMBER
		•	
1			

BILLING SUMMARY

Previous Bill	Payments Thank You	Adjustments	Balance	Current Charges	Finance Charges	Total Amount Due
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 ***

TERMS: NET 30 DAYS

SUMMARY OF CURRENT CHARGES

TOTAL CURRENT CHARGES

\$0.00



^{***} The balance owing is zero - please do not remit any payment.

Mountain Communications TransWorld Network, Corp. 7702 Woodland Center Blvd, Suite 50 Tampa, FL 33614

For customer service, call toll free 1-800-950-3015 or e-mail us at customersvc@twncorp.com
Hours: Mon-Fri 8:00am-8:00pm, Sat 8:30am-5:00pm (EST)

December 31, 2003	8134174450-0001	
BILL DUE DATE	ACCOUNT NUMBER	
December 1, 2003	3335738	
BILLING DATE	INVOICE NUMBER	

Page No. 3

CURRENT CHARGES

Monthly local line charges \$ Mandatory FCC charge per line included in local line charges					\$0.00	
Total Monthly Charges		e angli iki m	rijo q		jill *	\$0.00
Long Distance		Thanks Williams Williams				- Commence
Total Long Distance Calls				· 2		\$0.00
Taxes		***************************************				
Total Taxes	Ž i		#F (44 Y.	\$0 .00
Total Current Charges				Mariana Mariana	r.	\$0.00

PART III, A

Attach a copy of the charter, bylaws and or certificate of incorporation.

NOTE: Attached please find a copy of our original certificate of incorporation. This certificate was issued in our original name STRATEGIC ALLIANCES INC. Please also find the 2 amendments since filed that changed our company name first to LONDON TELECOM NETWORK, CORP then to our current name: TRANSWORLD NETWORK, CORP.

[SEE EXHIBIT 2 - ATTACHED]

5048

SECRETARY OF STATE

CERTIFICATE OF INCORPORATION

I, Joan Anderson Growe, Secretary of State of Minnesota, do certify that: Articles of Incorporation, duly signed and acknowledged under oath, have been filed on this date in the Office of the Secretary of State, for the incorporation of the following corporation, under and in accordance with the provisions of the chapter of Minnesota Statutes listed below.

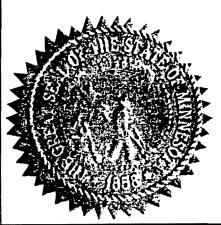
This corporation is now legally organized under the laws of Minnesota.

Corporate Name: STRATEGIC ALLIANCES INC.

Corporate Charter Number: 6D-697

Chapter Formed Under: 302A

This certificate has been issued on 12/21/1988.



Joan Anderson Grove Secretary of State. 6D-697

1912

ARTICLES OF AMENDMENT AMENDING ARTICLES OF INCORPORATION OF STRATEGIC ALLIANCES, INC.

Strategic Alliances, Inc., a Minnesota corporation, hereby adopts and files with Secretary of State these Articles of Amendment Amending Articles of Incorporation of Strategic Alliances, Inc. pursuant to Section 302A.139 of the Minnesota Business Corporation Act.

- 1. Article I is amended and replaced in its entirety with the following: "The name of the corporation is London Telecom Network, Corp."
- 2. The amendment has been adopted pursuant to Chapter 302A of the Minnesota Business Corporation Act.
- 3. These Articles of Amendment Amending Articles of Incorporation of Strategic Alliances, Inc. have been approved and adopted by the directors and shareholders of Strategic Alliances, Inc. as required by the Minnesota Business Corporation Act.

IN WITNESS WHEREOF, the undersigned, the ______ of Strategic Alliances, Inc., being duly authorized on behalf of Strategic Alliances, Inc., has executed this document this _____ day of November, 1997.

STRATEGIC ALLIANCES, INC.

Its chier Financia EMACOR

STATE OF MINNESOTA DEPARTMENT OF STATE FILED

DEC 03 1997

from Andrew Money
Socretery of State

060567

D-697

ARTICLES OF AMENDMENT AMENDING ARTICLES OF INCORPORATION OF LONDON TELECOM NETWORK, CORP.

London Telecom Network, Corp., a Minnesota corporation, hereby adopts and files with the Secretary of State these Articles of Amendment Amending Articles of Incorporation of London Telecom Network, Corp. pursuant to Section 302A.139 of the Minnesota Business Corporation Act.

ARTICLE I

1. Article I is amended and replaced in its entirety with the following: "The name of the corporation is Transworld Network, Corp."

ARTICLE II

1. Article III is amended and replaced in its entirety with the following:

The corporation is authorized to issue one hundred million (100,000,000) shares of capital stock, to be held, sold and paid for at such times and in such a manner as the Board of Directors may, from time to time, determine, in accordance with the laws of the State of Minnesota. Unless otherwise established by the Board of Directors, all shares of the corporation are common shares entitled to one vote and shall be of one class and series having equal rights and preferences in all matters. Unless otherwise provided in these Articles or Bylaws of the corporation, or in the terms of the shares, a common shareholder has one (1) vote for each share held. The Board of Directors shall have the power to establish more than one class or series of shares and to fix the relative rights and preferences of any such different classes or series.

ARTICLE III

The amendment to Articles of Incorporation set forth herein was, in all respects, adopted pursuant to Chapter 302A of Minnesota Statutes.

IN WITNESS WHEREOF, the undersigned, being duly authorized has executed these Articles of Amendment on the <u>g</u> day of April, 1999.

London Telecom Network, Corp.

Its: CHIEF

in anciar Depart

STATE OF MINNESOTA

APR 2 9 1999

They tiffings Secretary of State

013952

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; that this corporation is authorized to do business as a corporation at the time this certificate is issued; and that amendments to the articles of that corporation were filed on the dates listed below.

Name: Transworld Network, Corp.

Date Formed: 12/21/1988

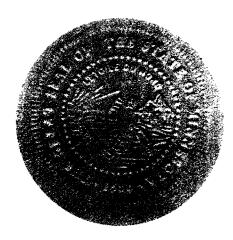
Chapter Governed By: 302A

Amendments Filed On:

.2/21/1988-ORIG FILING-155 S Wabasha #120

MN 55107--NAME -STRATEGIC ALLIANCES INC.

-St Paul



Mary Kiffen

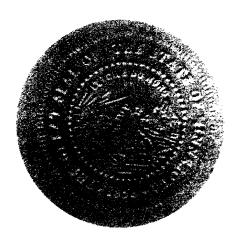
state of Minnesota

SECRETARY OF STATE

-2-

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07/18/1990-REG OFF
                       -1306 W Co Rd F #206
                       -Arden Hills
                                             MN 55112-
01/18/1991-REG OFF
                       -2353 Rice Str #106
                       -Roseville
                                             MN 55113-
D7/01/1992-SHARE/STOCK-
                                   25,000 SHARES/STOCK
09/22/1994-REG OFF
                       -1959 Sloan Pl #200
                       -St Paul
                                             MN 55117-
09/16/1997-MERGER
                       -Strategic Services Inc.
                                                 7K-547
12/03/1997-NAME
                       -London Telecom Network, Corp.
10/15/1998-OTHER
                       -Articles of Correction
04/29/1999-NAME
                       -Transworld Network, Corp.
          -SHARE/STOCK-
                              100,000,000 SHARES/STOCK
06/20/2000-SHARE/STOCK-
                                  100,000 SHARES/STOCK
07/23/2001-SHARE/STOCK-
                              100,000,000 SHARES/STOCK
06/05/2002-REG OFF
                       -331 2nd Ave S #740
                       -Mpls
                                             MN 55401-
```

This certificate has been issued on 06/04/03.



Mary Kiffmager Secretary of State.

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

RECEIVED AUG 0 5 2002

DATE: 07/30/02 REQUEST NUMBER: 4564-0575 TELEPHONE CONTACT: (615) 741-2286 FILE DATE/TIME: 07/30/02 1314 EFFECTIVE DATE/TIME: 07/30/02 1314 CONTROL NUMBER: 0263093

TO: TRANSWORLD NETWORK CORP 7702 WOODLAND CENTER BLVD/SUITE-50 TAMPA, FL 33614

RE: TRANSWORLD NETWORK, CORP. APPLICATION FOR REINSTATEMENT

IT HAS BEEN DETERMINED THAT THE ATTACHED APPLICATION FOR REINSTATEMENT CONTAINS THE INFORMATION REQUIRED BY STATUTE; THEREFORE THE ABOVE CORPORATION IS HEARBY REINSTATED, OR IF A FOREIGN CORPORATION, ITS CERTIFICATE OF AUTHORITY IS REINSTATED.

WHEN CORRESPONDING WITH THIS OFFICE OR SUBMITTING DOCUMENTS FOR FILING, PLEASE REFER TO THE CORPORATION CONTROL NUMBER GIVEN ABOVE.

FOR: APPLICATION FOR REINSTATEMENT

FROM: TRANSWORLD NETWORK CORP 2502 ROCKY POINT DR STE 170 TAMPA, FL 33607-0000

AGRICULTURE H

ON DATE: 07/30/02

FEES

\$70.00

\$0.00

TOTAL PAYMENT RECEIVED:

RECEIVED:

\$70.00

RECEIPT NUMBER: 00003122525 ACCOUNT NUMBER: 00314760

Pely C Darnell

RILEY C. DARNELL SECRETARY OF STATE





Bepartment of State

Corporate Filings
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, TN 37243

APPLICATION FOR REINSTATEMENT FOLLOWING ADMINISTRATIVE DISSOLUTION/REVOCATION

For Of	fice Use	Only
(7) [1]	-	
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	8	7
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S.	70	
က	dent scarce	
-	••	
المسلم	Province:	

Pursuant to the provisions of Section 48-24-203 or Section 48-25-303 of the Tennessee Business Corporation Act or Section 48-64-203 or Section 48-65-303 of the Tennessee Nonprofit Corporation Act, this application is submitted to the Office of the Secretary of State, State of Tennessee, for reinstatement.

cation is submitted to the Office of the Secretary of State, State of Tennessee, for reinstatement.					
ETWORK, GRP					
ocation is 3-16-01 (must be month,					
ek the applicable box 1					
k the applicable box.]					
4. The corporate name as listed in number one (1) satisfies the requirements of Tennessee Code Annotated Section 48-14-101 or 48-54-101, as appropriate.					
5. The corporation control number as assigned by the Secretary of State, if known is					
[NOTE (APPLIES TO FOR-PROFIT CORPORATIONS ONLY): Prior to this document being accepted for filing, the Division of Business Services will request tax clearance verification from the Tennessee Department of Revenue that the business has properly filed all reports and paid all required taxes and penalties. If we cannot obtain such tax clearance verification from the Department of Revenue, this document will be rejected and returned to the applicant.]					
ANSWORLD NETWORK, CORP THE OF Corporation afture LIN WOOD THE (typed or printed)					

PART III, A (d)

Describe the corporate structure of the applicant, including any identity of any parent or subsidiary of the applicant. Disclose whether any parent or subsidiary is publicly traded on any stock exchange.

The Florida based company, PCC Holdings, Inc. owns 100% of TransWorld Network, Corp. TransWorld Network, Corp has no subsidiaries.

PCC Holdings, Inc is not publicly traded on any stock exchange.





TransWorld Network Corp.

7702 Woodland Center Boulevard, Suite 50 Tampa, Florida 33614

Telephone (813) 890-2200 1-800-253-0665 Fax (813) 890-2712

January 06, 2004

TN Regulatory Authority ATTN: Deborah Taylor Tate, Chairman 460 James Robertson Parkway Nashville, TN 37243 RECEIVED

JAN 0 9 2004

TN REGULATOR AUTHOR TY ECONOMIC AMALYSIS 3 MARKET MONITORING DIVISION

RE: Additional information for Docket: 04-00001

TransWorld Network, Corp (Telecom Reseller Applicant)

Ms. Tate:

Enclosed please find for filing originals and one copy each of TransWorld Network, Corp's Certificates of Good Standing for Tennessee (as a foreign corporation) and Minnesota (as a domestic corporation).

Our application as a telecommunications reseller was filed with your division last week and these certificates had not yet been received. On the application, I indicated that I would forward them upon receipt. Please accept them as part of our application, Docket: 04-00001.

I have also enclosed an extra copy of this letter to be date stamped and returned to me in the enclosed, self-addressed, postage paid envelope. If you have any questions, or if I may provide you with additional information, please do not hesitate to contact me. I can be reached at (813) 890-2207 from 8:30am to 5:30pm EST.

Respectfully submitted,

Sandes Vinas

Lourdes Viñas

Director, Regulatory & Compliance

Enclosures

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Secretary of State Division of Business Services 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

TRANSWORLD NETWORK CORP %LOURDES VINAS 7702 WOODLAND CENTER TAMPA, FL 33614

ISSUANCE DATE: 12/23/23 REQUEST NUMBER: 033575 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 03/01/1993 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0263093 JURISDICTION: MINNESOTA

REQUESTED BY: TRANSWORLD NETWORK CORP %LOURDES VINAS 7702 WOODLAND CENTER TAMPA, FL 33614

CERTIFICATE OF AUTHORIZATION

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "TRANSWORLD NETWORK, CORP."

A CORPORATION FORMED IN THE JURISDICTION SET FORTH ABOVE, IS AUTHORIZED TO TRANSACT BUSINESS IN THIS STATE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE AUTHORIZATION OF THE CORPORATION HAVE BEEN PAID; THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED WITH THIS OFFICE; AND THAT AN APPLICATION FOR CERTIFICATE OF WITHDRAWAL HAS NOT BEEN FILED.

ON DATE: 12/23/03 FOR: REQUEST FOR CERTIFICATE

FROM: TRANSWORLD NETWORK CORP 7702 WOODLAND CENTER SUITE 50 TAMPA, FL 33614-0000

FEES \$20.00 RECEIVED: \$0.00 TOTAL PAYMENT RECEIVED: \$20.00

RECEIPT NUMBER: 00003397458 ACCOUNT NUMBER: 00314760



RILEY C. DARNELL SECRETARY OF STATE

Secretary of State Division of Business Services 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

TO: TRANSWORLD NETWORK CORP %LOURDES VINAS 7702 WOODLAND CENTER TAMPA, FL 33614

ISSUANCE DATE: 12/23/233
REQUEST NUMBER: 033575
TELEPHONE CONTACT: (615) 741-6488

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FOR: REQUEST FOR CERTIFICATE

TRANSWORLD NETWORK CORP 7702 WOODLAND CENTER SUITE 50

ŤĂM̈́PĀ, FL 33614-0000

ON DATE: 12/23/03

RECEIVED:

\$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00003397458 ACCOUNT NUMBER: 00314760

RILEY C. DARNELL SECRETARY OF STATE

SS-4458

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; that this corporation is authorized to do business as a corporation at the time this certificate is issued; and that amendments to the articles of that corporation were filed on the dates listed below.

Name: Transworld Network, Corp.

Date Formed: 12/21/1988

Chapter Governed By: 302A

Amendments Filed On:

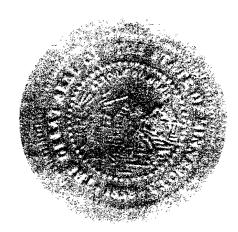
2/21/1988-ORIG FILING-155 S Wabasha #120

-St Paul

MN 55107-

-NAME

-STRATEGIC ALLIANCES INC.



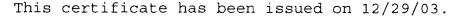
Mary Kiffmager Secretary of State.

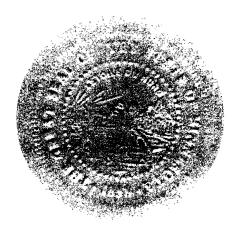
state of Minnesota

SECRETARY OF STATE

-2-

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7/18/1990-REG OFF
                      -1306 W Co Rd F #206
                      -Arden Hills
                                            MN 55112-
1/18/1991-REG OFF
                      -2353 Rice Str #106
                      -Roseville
                                            MN 55113-
7/01/1992-SHARE/STOCK-
                                  25,000 SHARES/STOCK
9/22/1994-REG OFF
                     -1959 Sloan Pl #200
                      -St Paul
                                            MN 55117-
9/16/1997-MERGER
                     -Strategic Services Inc.
                                                 7K-547
2/03/1997-NAME
                     -London Telecom Network, Corp.
0/15/1998-OTHER
                     -Articles of Correction
4/29/1999-NAME
                     -Transworld Network, Corp.
         -SHARE/STOCK-
                             100,000,000 SHARES/STOCK
6/20/2000-SHARE/STOCK-
                                 100,000 SHARES/STOCK
7/23/2001-SHARE/STOCK-
                             100,000,000 SHARES/STOCK
6/05/2002-REG OFF
                     -331 2nd Ave S #740
                     -Mpls
                                            MN 55401-
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Mary Kiffmayer Secretary of State.