

Applicant / Licensee Information

1) First Name (if Individual): PETRA	MI:	Last Name: RAMASASTRY	Suffix:
2) Applicant Name (if entity):		3) FCC Registration Number (FRN): ~004319711	

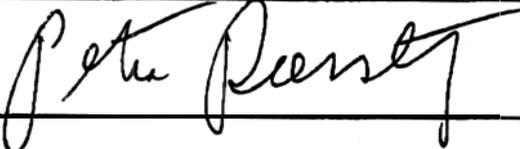
Related FCC Regulated Businesses of Applicant / Licensee

4a) Name and address of all FCC Regulated Businesses owned by Applicant / Licensee (use additional sheets, if necessary):	4b) Principal Business:	4c) FCC Registration Number (FRN):	4d) Percent of Interest Held:

Signature

5) Typed or Printed Name of Party Authorized to Sign

First Name: PETRA	MI:	Last Name: RAMASASTRY	Suffix:
Title:			

Signature: 	Date: 12/12/01
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Failure to Sign This Application May Result In Dismissal Of The Application And Forfeiture Of Any Fees Paid

WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, Section 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, Section 312(e)(1)) AND/OR FORFEITURE (U.S. Code, Title 47, Section 663).



12/28/01 RSH