Federal (REFERENCE COPY - Not for submission) Communications Commission Resumption of Operations of an AM Station Application File Number: Submit Date: 09/16/2010 Lead Call Sign: WGIT Facility ID: 87150 FRN: 0025144825 Status Date: 09/17/2010 Service: Full Power AM Filing Status: Purpose: Resume Operations Status: Granted Inactive General Section Question Response Information Attachments Are attachments (other than associated schedules) being filed with this application? Applicant Applicant Name, Type, and Contact Information Information Applicant Address Phone Email **Applicant Type** INTERNATIONAL BROADCASTING CORPORATION CALLE BORI +1 (787) 274-OTH 1800 Applicant #1554 Doing Business As: INTERNATIONAL BROADCASTING **URB CARIBE** CORPORATION SAN JUAN, PR 00927 **United States** Contact **Contact Name** Address Phone Email **Contact Type** Representatives +1 (703) 812-(1) SWIFT@FHHLAW. **RICHARD F. SWIFT,** 1300 NORTH 17TH Legal **ESQUIRE** STREET 0400 COM Representative 11TH FLOOR ARLINGTON, VA 22209 **United States Station Status** Section Question Response **Station Status** 09/10/2010 Date the station resumed full power/operations:

Certification	Section	Question	Response
	General Certification Statements	The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).	

	The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification § 1.2002(c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	
Authorized Party to Sign	 FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND /OR FORFEITURE (U.S. Code, Title 47, §503). 	
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	PEDRO ROMAN COLLAZO

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>1398856_894065.</u> txt	Applicant	All Purpose	OPERATING PARAMETERS	Done with Virus Scan and/or Conversion