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Missouri Public Service Commission

MEDIA COUCERS INC

Full Company Name (Do not abbreviate, yet include any Commission approved AKA/DBA/Fictitious Name, if applicable.)

COMPETITIVE LOCAL EXCHANGE CARRIER

-and /-or----

INTEREXCHANGE TELECOMMUNICATIONS CARRIER

ANNUAL REPORT
TO THE

MISSOURI PUBLIC SERVICE COMMISSION

For The Year Ending December 31, 2005

CLE	C-IXC				
	Annual Report of MEDIA CONCEPTS, Inc				
	for the year ending December 31, Z				
1.					
	State in full the exact 'certificated' name of the Competitive Local Exchange Carrier (CLEC)				
	and/or Interexchange Telecommunications Carrier (IXC):				
	(Do not abbreviate; yet include any Commission approved AKA/DBA/Ficitious Name, if applicable.)				
	•				
	MEDIA CONCERS				
•	State in full the company's street address, mailing address, telephone number, fax number, and				
2.	e-mail address*:				
	19140 DNEWWOOD				
	15140 Sherwood 57 & 100 LEWOOD, K.S, 66224				
	- VE / (77/)				
	100000 , NO 160 CCY				
3.	Is the utility certificated as a Competitive Local Exchange Carrier? If yes, state effective date				
٠.	(contained in Commission Order approving) of certification by the MO Public Service				
	Commission and associated case number (original certificate or merger/name change if name on				
	tariff effected):				
	Date (e.g. 00/00/0000): Case No:				
	Date (e.g. 00/00/0000).				
4.	Is the utility certificated as a Interexchange Telecommunications Carrier? If yes, state effective				
	date (contained in Commission Order approving) of certification by the MO Public Service				
	Commission and associated case number (original certificate or merger/name change if name on				
	tariff effected):				
	Date (e.g. 00/00/0000): Case No:				
_					
5.	5. Was the company certificated in Missouri under any other name(s)? If yes, please provide all				
	names and time periods involved since the original certification:				
	No				
	<u> </u>				
6	This Competitive Local Exchange/Interexchange Telecommunications Carrier is a (Check box				
u.	with an X) and if different than certificated name listed above (e.g. parent corporation name) or				
	if 'Other' is identified, explain:				
	ii Other is identified, explain.				
ľX	Corporation				
	Partnership LP				
\vdash	Sole Proprietorship Other - Explain				
7	State in full the name, street address, telephone number, and e-mail address* of the individual				
7.	completing/verifying this Annual Report:				
	Different allerand				
	15142 SCHENCED				
	LEAWOOP, KS. 6622A				
	202 202 7888				
	710077				
	(*) Required if available. State n/a (not available) if no e-mail address is available.				

CLEC-IXC	_	
Annual Report of	MEDIA CONCR	ers Inc
•	·	for the year ending December 31, 200
	what state is the Competitive Local Exons Carrier organized:	AVEOS
general officers of at the end of the year	ear:	rexchange Telecommunications Carrier
Assumed	Title of General Officer	Name of Person Holding Office
1993	THES, DEUT	FORER WHELAN
10. Please provide a l	isting of all mergers, consolidations, a	nd reorganizations, completed during the
	Hone	

-	following information concerning Total venues (i.e., Missouri Jurisdictional) Rev	for the year endi Company and gross	ng December 31, _ intrastate	
Revenues:	renues (i.e., ivissouri suristictional) Rev	Total Company	-	al
Operating Revenue	s* from Telecommunication Services	0	0	
Access Fee Revent	ies		· · · · · · · · · · · · · · · · · · ·	
Federal USF Subsi	dies	· · · · · · · · · · · · · · · · · · ·		
State USF Subsidie	es			
Other Revenues	_	_		

MO Jurisdictional should match Statement of Revenue (MoPSC Assessment)

* Missouri Revised Statutes §386.020(53)

TOTAL REVENUES

- (53) "Telecommunications service", the transmission of information by wire, radio, optical cable, electronic impulses, or other similar means. As used in this definition, "information" means knowledge or intelligence represented by any form of writing, signs, signals, pictures, sounds, or any other symbols. Telecommunications service does not include:
- (a) The rent, sale, lease, or exchange for other value received of customer premises equipment except for customer premises equipment owned by a telephone company certificated or otherwise authorized to provide telephone service prior to September 28, 1987, and provided under tariff or in inventory on January 1, 1983, which must be detariffed no later than December 31, 1987, and thereafter the provision of which shall not be a telecommunications service, and except for customer premises equipment owned or provided by a telecommunications company and used for answering 911 or emergency calls;
 - (b) Answering services and paging services;
- (c) The offering of radio communication services and facilities when such services and facilities are provided under a license granted by the Federal Communications Commission under the commercial mobile radio services rules and regulations;
- (d) Services provided by a hospital, hotel, motel, or other similar business whose principal service is the provision of temporary lodging through the owning or operating of message switching or billing equipment solely for the purpose of providing at a charge telecommunications services to its temporary patients or guests;
 - (e) Services provided by a private telecommunications system;
 - (f) Cable television service;
 - (g) The installation and maintenance of inside wire within a customer's premises;
 - (h) Electronic publishing services; or
- (i) Services provided pursuant to a broadcast radio or television license issued by the Federal Communications Commission:

CLEC-IXC Annual Report of MEDIA Concess Inc

for the year ending December 31, 200

12. Local Exchange Carriers Federal/State Low-Income/Disabled Universal Service Fund Subscribers

<u>Background and Purpose</u>: To ascertain on a monthly basis the number of subscribers being provided federal and/or Missouri low-income/disabled support as being reported to USAC (federal support, Form 497) and the fund administrator of the Missouri programs (Missouri support).

Calendar Year 2005

	Number of		Number of		
Month	Missouri Low Income subscribers		Missouri Disabled subscribers		
January _		<u> </u>			
February					
March					
April			I		
May	· -				
June					
July				,	
August	1				
September				1	
October					
November			{		
December	December		1		
TOTAL: 0				0	

Competitive Local Exchange Carrier RESIDENTIAL RETAIL ACCESS LINE REPORT

Note: This page is for <u>retail sales only</u>. Do not report the number of lines you are providing on a wholesale basis.

Exchange (Use name in the tariff)	Full Facilities Lines	Partial Facilities Lines	Other Resale Lines	Pure Resale Lines
		_		
TOTALS:	0	0	0	0

CLEC-IXC Annual Report of WEDIN COUCHES TUC Page 5(b)

for year ending December 31, 2005

Competitive Local Exchange Carrier BUSINESS RETAIL ACCESS LINE REPORT

Note: This page is for <u>retail sales only</u>. Do not report the number of lines you are providing on a wholesale basis.

Exchange (Use name in the tariff)	Full Facilities Lines	Partial Facilities Lines	Other Resale Lines	Pure Resale Lines	Data/ISP-Only Lines
		an gas a la			
			•		
TOTALS:	0	0	0	0	_ o _

Submitting this Annual Report is an "option" through EFIS.

A registered official company representative is authorized to utilize this option, type in all necessary information below, including the Notary's information (pursuant to Sections 432.200 and 432.295). After submitting the Annual Report through EFIS, you will receive a BMAR (confirmation) number. Indicate that BMAR number on the original and retain for your records.

Annual Report of MEDIN CONERPS INC
for the year ending December 31, Zoo
VERIFICATION
The foregoing report must be verified by the oath of the President, Treasurer, General Manager or Receiver of the company. The oath required may be taken before any person authorized to administer an oath by the laws of the State in which the same is taken
OATH
State Of Many
County Of } ss:
R. L. E Willer
(Insert here the name of the affiant) makes oath and says that
P
s/he is / reside /
(Insert here the official title of the affiant)
of Media Concerets bee
(Insert here the exact legal title or name of the respondent)
that s/he has examined the foregoing report; that to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent.
JANVARY 1, 2005, to and instruding PECEMBERS, 1 200 2
Gelller
(Signature of affiant)
Subscribed and swom to before me, a Matary Julie in and for the
State and county above named, this /7 day of Curvil 2006
No Commission anning
My Commission expires (legent /5", 2008
KAREN L. SCOTT Notary Public - State of Kansas My Appt. Expires 8/15/08
(Signature of officer authorized to administer oaths)
Missouri Revised Statutes § 392 210

Original in its entirety must be mailed (if not utilizing EFIS) to:

Manager of the Data Center MoPSC, 200 Madison Street, Suite 100

Jefferson City, MO 65101 (P.O. Box 360, 65102-0360)

MEDIA CONCEPTS, INC. 15140 SHERWOOD, SUITE 100 LEAWOOD, KS 66224



MANAGER OF THE DATA CENTER MISSOUR, PUBLIC SERVICE COMMISSION ZOO MADISON ST., STE 100 JEFFERSON CITY, MD, 65102-0360

65101+3254-99 C002

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