FCC FORM 1275
CERTIFICATION FOR OPEN VIDEO SYSTEMS

A. Company Information

Company Name:

Digital Broadcasting OVS Corporation

Contact Person:

Roy Jimenez, CEO

Mailing Address:

807 Ponce de Leon

City:	State:	Zip Code:
San Juan	P.R.	00907

Phone Number:	Fax Number:
787-546-4660	N / A

B. Attach a statement of ownership, including all affiliated entities

C. Eligibility and Compliance Representations

	Yes	No	N/A
1. If you are a cable operator applying for certification within your cable franchise area, are you qualified to operate an open video system under 47 C.F.R. § 76.1501?		X	
2. Do you agree to comply and to remain in compliance with each of the Commission's regulations in 47 C.F.R. §§ 76.1503, 76.1504, 76.1506(m), 76.1508, 76.1509, and 76.1513?	X		
3. Do you agree to comply with the Commission's notice and enrollment requirements for unaffiliated video programming providers?	X		
4. If applicable, do you agree to file changes to your cost allocation manual at least 60 days before the commencement of service?	X		

D. System Information

1. Provide a general description of the anticipated communities or areas to be served upon completion of the system.

State of California: Sacramento, Los Angeles, San Francisco, Santa Ana and San Diego.

State of Florida: Jacksonville, Orlando, Miami, Tampa and Tallahassee.

U.S. Territory of Puerto Rico and the 78 municipalities.

2. Anticipated Digital Capacity:	10,000		3. Anticipated Analog Capacity:	Zero	
4. If Switched Digital, Anticipated Number of Channel Input Ports:	10,000				

E. Verification Statement

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE TITLE 18, SECTION 1001), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503)

To the best of my knowledge and belief, the representations made herein are accurate according to the most recent information avail.

Name: Roy Jimenez	Signature: ROY JIMENEZ
Title: CEO	Date: Monday, May 9 2022