## Premier Hosting Inc. dba Infiniwiz

#### Company Name

(Provide the full name of the company as certificated or registered with the Missouri Public Service Commission. Do not abbreviate; include any Commission approved d/b/a or fictitious name, if applicable.)

# TELECOMMUNICATIONS COMPANY OR IVOIP PROVIDER ANNUAL REPORT TO THE

#### MISSOURI PUBLIC SERVICE COMMISSION

For the Calendar Year of January 1 - December 31, 2018

This filing is required pursuant to Commission Rule 4 CSR 240-28.012 and/or Section 392.210 RSMO. Please select how the company is certificated or registered with the Commission under the Company Name as shown above (check all that apply): Incumbent Local Telecommunications Company (not competitively classified (LEC) Incumbent Local Exchange Telecommunications Company (competitively classified (LEC) Competitive Local Exchange Telecommunications Company (CLEC) Interexchange Telecommunications Company (IXC) Local Non-switched Telecommunications Provider (classified in EFIS as IXC) Interconnected Voice over Internet Protocol Service Provider (IVoIP) If more than one certificate or registration is held by the company then keep in mind that you must file an annual report in the Commission's Electronic Filing and Information System (EFIS) based on each certificate or registration. In such situations. we anticipate the annual reports to be identical; however please verify the following: The various annual reports filed in EFIS are identical. The various annual reports filed in EFIS are different. Not applicable (Company only has one certificate or registration; therefore only one annual report was filed in EFIS.) Please choose one of the following filing options to indicate the security level of the filing: Public submission (NOT Confidential) Non-Public submission (Confidential) (See instructions for special requirements.) For this filing to be considered Confidential, additional submission of materials is required, pursuant to Commission Rule 4 CSR 240-2.135. Please review the instructions document on the previous page before proceeding.

Form Page 1

For use when filing under seal.

Excel Issue Date: 12/05/2018

	Annual Report of	of		Premier	Hosting Inc. dba Infiniwiz
		for the	cale	ndar year	of January 1 - December 31, 2018
St	tate in full the company's	s information b	elow	r:	
₩.	1835 Hicks Road, Suite B				847-994-1111
		s, Rolling Meadow Street Address	5, IL.	00000	847-994-1111 Telephone Number
	, -	Road, Suite B			847-994-1101
	Company Mailing Address (		treet a	address)	847-994-1101 Fax Number
	Rolling Meadows	IL		60008	
	City	State	<del></del>	Zip	<u>alek.pirkhalo@infiniwiz.com</u> E-Mail Address
Th	nis company is currently a	(check appropri	ate bo		•
	✓ Corporation	Sole Proprieto	rship		□ LP
	Partnership	□ rrc			Other - Explain
_	☐ Latricismb				
	nual Report Contact Infor	mation:			
An	74 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				
Lis			eting t	the form, v	vhether an employee or a third-party preparer
Lis	st the contact information of t is may differ from the addre		eting t	the form, v	vhether an employee or a third-party preparer
Lis		ss in Item No. 1.	Λ.		407-260-1011
Lis	is may differ from the addres Mark Lammert, CPA, T	ss in Item No. 1.	Λ.		, , , , , , , , , , , , , , , , , , , ,
Lis	is may differ from the addres Mark Lammert, CPA, T N 242 Rangeline Road	ss in Item No. 1.  Tax Preparer for Clame  I, Longwood, FL	Compa	any	407-260-1011
Lis	nis may differ from the address Mark Lammert, CPA, T N 242 Rangeline Road Street	ss in Item No. 1.  Fax Preparer for Clame  I, Longwood, FL.  Address	Compa	any	407-260-1011 Telephone Number
Lis	is may differ from the address Mark Lammert, CPA, T N 242 Rangeline Road Street 242 Ran	ss in Item No. 1.  Tax Preparer for Clame  I, Longwood, FL.  t Address geline Road	Compa	any	407-260-1011 Telephone Number 407-260-1033
Lis	is may differ from the address Mark Lammert, CPA, T N 242 Rangeline Road Street 242 Ran	ss in Item No. 1.  Fax Preparer for Clame  I, Longwood, FL.  Address	Compa	any	407-260-1011 Telephone Number 407-260-1033 Fax Number
Lis	is may differ from the address Mark Lammert, CPA, T N 242 Rangeline Road Street 242 Ran	ss in Item No. 1.  Tax Preparer for Clame  I, Longwood, FL.  t Address geline Road	Compa	any	407-260-1011 Telephone Number 407-260-1033 Fax Number mark@csilongwood.com
Lis	is may differ from the address Mark Lammert, CPA, T N 242 Rangeline Road Street 242 Ran Mailing	ss in Item No. 1.  Tax Preparer for Clame  I, Longwood, FL.  t Address geline Road g Address	32750	any )	407-260-1011 Telephone Number 407-260-1033 Fax Number mark@csilongwood.com
Lis	is may differ from the address  Mark Lammert, CPA, T  N  242 Rangeline Road Street 242 Rang  Mailing Longwood City  entify the principal or gene	ss in Item No. 1.  Tax Preparer for Clame  I, Longwood, FL.  Address geline Road g Address  FL.  State eral officers of the	32750	32750 Zip	407-260-1011 Telephone Number 407-260-1033 Fax Number mark@csilongwood.com
Lis	Mark Lammert, CPA, T N 242 Rangeline Road Street 242 Rangeline Mailing Longwood City entify the principal or gene iditional sheet, if enough span	ss in Item No. 1.  Tax Preparer for Clame  I, Longwood, FL.  Address geline Road g Address  FL.  State eral officers of the ce is not provided  Officer	32750	32750 Zip	407-260-1011 Telephone Number 407-260-1033 Fax Number mark@csilongwood.com E-mail Address  the end of the year. Please include an occompletely provide the requested information
Lis	Mark Lammert, CPA, T  N  242 Rangeline Road  Street 242 Rang  Mailing  Longwood  City  entify the principal or gene iditional sheet, if enough spar	ss in Item No. 1.  Tax Preparer for Clame I, Longwood, FL.  Address geline Road g Address FL State eral officers of the ce is not provided  Officer asurer	32750	32750 Zip	407-260-1011 Telephone Number 407-260-1033 Fax Number mark@csilongwood.com E-mail Address  the end of the year. Please include an ocompletely provide the requested information.  Name of Person Holding Office

6. Please provide the following information concerning the company's revenues for this calendar year:

Row	Revenues		(Column A)			(Column B)
I. RE	TAIL	**		**	**	
1.	Local Service Revenues include tariffed revenues attributed to local telecommunications services, extended area service, secondary features such as call forwarding, caller ID, local operator services, directory-related services, etc. and for IVoIP service.				W. N. S. S. S.	
2.	Interexchange Revenues include revenues attributed to interexchange telecommunications services such as toll services, 800 services, interexchange operator services and interexchange IVoIP services.			から からの		
3.	Non-Switched Telecommunications Service Revenues include revenues attributed to retail local and interexchange private line services (but not special access or private line services provided to other telecommunications carriers).					
4.	Bundled or Packaged Revenues include any revenues whereby the company is providing voice services in combination with multiple services whereby revenue can not be easily attributed to local, interexchange or non-switched categories. If such bundles includes Internet, video or some non-regulated service then the company's revenue shall be based on the company's rate offer for solely voice services. The excess revenue associated with the bundled service which is over the amount related to revenue associated with voice only service shall be recorded in the Total Company column. If voice service is only offered as part of a bundled service, the company shall identify all revenue associated with the bundle of services in the Missouri Jurisdictional column.					
5.	Retail Uncollectible Revenues from telecommunications revenues. (This amount is generally a negative number.)					
6.	RETAIL TOTAL (This amount should equal the total of Rows 1 - 5 above and should also match your Missouri Universal Service Fund Net Jurisdictional Revenue Report amount.)	STATE OF THE PERSON NAMED IN		の名の名の		
II. O	THER			1	14	
7.	Wholesale Revenues include intrastate switched, special access service revenues, carrier billing and collection revenues, and any other revenues derived from other telecommunications carriers.	1000		R LORS		
	Miscellaneous Revenues <sup>2</sup> associated with non-retail services, such as, advertising revenues, rent revenues, corporate operations revenues, special billing arrangements, customer operations, plant operations, other incidental regulated revenues, and other revenue settlements. (NOTE FOR ILEC ONLY: refer to FCC account #s: 5230, 5240, 5250, 5261, 5262, 5263, 5264, 5269, and 5270.)					
	Other Uncollectible Revenues from other revenues. (This amount is generally a negative number.)			Sec. 3		
	High-Cost Federal USF Revenues include all revenues received as support from the Universal Service Fund for the High-Cost program.		N/A			
	Other Federal USF Revenues include all revenues received as support from the Universal Service Fund for the following programs: Low Income, Schools and Libraries, and Rural Health.		. N/A			
12.	State USF Revenues include all revenues received as support from the Universal Service Fund.					
	TOTAL REVENUES (This amount should equal the total of Rows 6 - 12 above.) Total MO Jurisdictional Revenue (Column A) should match Total Gross Intrastate Operating Revenue on the <b>Statement of Revenue</b> .					

<sup>&</sup>quot;Telecommunications Service" as defined by Missouri Revised Statutes Section 386.020(54).

<sup>&</sup>quot;Interconnected Voice over Internet Protocol service" as defined by Section 386.020(23) RSMo.

<sup>1</sup> List total regulated revenue and IVoIP revenue provided by a registered company and, if applicable, non-regulated revenue for company name as listed at

the top of this page.

Do not include revenues for any company NOT listed at the top of the page.

<sup>&</sup>lt;sup>2</sup> If you have miscellaneous revenue related to retail telecommunications services, then enter it in Row 1.

7. Line Quantities for Local Voice Service & IVoIP Service<sup>1</sup>

	Retail							Wholesale to Non-Registered Nomadic IVolP	
Exchange <sup>2</sup>	**	Residential	**	**	Business	**	**	Providers <sup>3</sup>	**
			100						
1.2.	90								
							28		
	3		13						
									1
			9						
	100		100			75	20		
			88				30		
			6						
	141								
			336						
	1								
	16		279			15%			
Totals:	100		200						

<sup>&</sup>lt;sup>1</sup> See instructions for additional clarification about filling out this page.

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	For use when file	ng under seal

<sup>&</sup>lt;sup>2</sup> Exchange refers to areas as listed in ILEC tariffs. (Exchanges are not always the same as rate centers, wire centers and central offices.)

<sup>&</sup>lt;sup>3</sup> Wholesale to Non-registered Nomadic IVoIP Providers refers to arrangements where your company is providing wholesale services for a nomadic IVoIP provider who is not registered with the Missouri PSC. (Do not use this column for retail line quantities or if your company sets the end user's rates.)

for the calendar year of January 1 - December 31, 2018

### Relay Missouri Annual Billing, Collections and Retention

8. Any ILEC, CLEC or VoIP provider must submit information in the table below.<sup>1</sup> (The table should be completely filled-in. The only exception is if a company is reporting "0" line quantities on page 4 whereby insert \$0 in the total row for each of the three columns.)

Month	Relay Missouri Revenue Collected (collected or received, according to your record- keeping methods)			Relay Missouri Retention Amount (of the amount collected)				Relay Missouri Revenue Remitted to Commission (of the amount collected)		
	**		* *			**	**	**		
January							100			
February							- 160			
March							-878			
April				200						
May										
June										
July						953				
August				100						
September						36				
October	350		17 16			373				
November										
December						1	199			
Total				1						

in Decemb	-		•	, ,	applied to your	
. If your firm	did not impo	ose the Relay M	issouri Surch	arge, please ex	plain:	

for the calendar year of January 1 - December 31, 2018

#### **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 (Notary Public) by the laws of the State in which the same is taken.

			N A 7711		
		(	DATH	5	
State Of		Illinois		}	
		,		} ss:	
County Of		Cook		) 33. }	
		QUUK		ſ	
	Ale	ksey Pirk	halo	makes oath and	f cour that
•	Name of Affiant (Co	mpany Off	icial/Representative)		. says tilat
s/he is			Vice President		
	Official Ti	tle of the A	Affiant (Company Offic	ial/Representative)	·····
of		Premier	Hosting Inc. dba In	finiwiz	
•	Exact Legal Title	or Name o	f the Respondent (Ce	ertificated Company	Name)
					-
and is located at	1835 Hick	ks Road,	Suite B, Rolling Me	adows. IL 60008	
-	Address and Teleph	one Numb	er of the Affiant (Con	npany Official/Repres	sentative)
applicable) the com and belief, all listed	siness and affairs of the pany's contact informa contacts are correct.	e above-na tion in EFI	amed respondent, an 'S; to the best of his o	d 2) examined (and or her knowledge, i	updated as iformation,
from _	January 1 ,	2018	$\_$ , to and including $\_$	December 31	2018
	Month/Day	Year	MIRAAR	Month/Day	Year
	-	Signa	ture of Affiant (Comp	env Official/Renrese	nistival
		(if electr	onic signatures are used, yo	u <u>must</u> use "/s/" before th	e name.)
Subscribed and swor	n to before me, a Notary	Public, in a	and for the State and C	ounty above named.	
this <u>TWM</u>	eth	day of	March	2019	~'
My Commission expir	res	02	-22-20	<i>20</i>	2020
	1	11 000	<b>&gt;</b>		
-		77/8//	Signature of No	tany Dublia	
∮ ∴n/	NADI HASSAN	(If electro	nic signatures are used, you	must use "/s/" before the n	eme.)
7 .	Official Seal	•			
My Commiss	ublic - State of Illinois	1	Notary Commiss	ion Number	
-	Missouri	_J, Revised St	tatutes § 392.210 or §39	3. <i>14</i> 0	