1/27/99

SCANNED R ORIGINAL

TO:FLORIDA PUBLIC SERVICE COMMISSION FROM:FLORIDA COAST SYSTEMS INC. REF:REGULATORY ASSESSMENT FEE ATT: BLANCA S. BAYO

DEAR BLANCA,

981487-TC

HERE IS THE MODIFIED REGULATORY ASSESSMENT FEE RETURN FOR I DID NOT RECEIVE THE 1998 ONE AND HOPE THIS IS SATISFACTORY.

I HAVE PAID MY 1997 DUES AND HAVE THE RETURNED CASHED CHECK FROM THE PSC IF YOU NEED FURTHER DETAILS ON THIS CONTACT MY BOOKKEEPER BARBRA WAYNE AT 305-253-0986 SHE WILL PROVIDE YOU WITH THIS.

WAS VERY SURPRISED TO SEE THAT MY CERTIFICATE WAS UP FOR CANCELLATION FOR ON THIS FORM IT SAYS YOU HAVE UNTIL JAN 30.1998 TO FILE I HOPE YOU WILL TAKE THIS UP WITH THE PROPER PEOPLE AND CORRECT THIS.

YOUR ATTENTION TO THIS MATTER IS APPRECIATED

SINCERELY,

JOHANNA VOGELSANG

'ACK Canto AFA APP CAF CMU CTR -EAG -LEG -LIN -OPC _____ RCH _____ SEC _ WAS _____ OTH ____

RICK Moses RAR

DOCUMENT NUMBER-DATE 0 30 FEB-2 S FPSC-RECORDS/REPORTING TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/1998 Pay Telephone Provider Regulatory Assessment Fee Return

STATUS:	Florida Public, Service Commission (See Filing Instructions on Back of Form)	FOR PSC USE ONLY Check#		
Actual Return Estimated Return PERIOD COVERED: 10/08/1997 TO 12/31/19 O1/01/1049 8+0	TG150 99 F.B1 MM 11: 35 Florida Coast Systems Inc1 MM 11: 35 520 S.E. 12th Street, 1#101 ROOM Dania, FL 33004-4630 DEPOSIT DAT	Postmark Date 1127188		
12/31/1998	Please Complete Below If Official Mailing Address Has Cha			
(Name of Company)	(Address)	(City/State) (Zip)		
LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT		
1. Gross Operating	Gross Operating Revenue			
2. Gross Intrastate H	Gross Intrastate Revenue			
3. LESS: Amounts (Attach Listing)*	LESS: Amounts Paid for Services to Local Telephone Companies (<u>3,96441</u> (Attach Listing)*			
	(Line 2 less Line 3)			
5. Regulatory Asses	. Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)			
6. Penalty for Late	6. Penalty for Late Payment			
7. Interest for Late	Payment			
8. TOTAL AMOU	NT DUE	\$ 50		
AS PRO	OVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMU	RICK Moses		
FLORIDA COA	FIRST UNION N. ST SYSTEMS, INC.			
	LIC SERVICE COMMISSIO	******50.00 \$		
ORDER OF Fifty and no/100****	*******	**************************************		
MEMO1998 REULATORY	ASSESSMENT FEE			

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AUTHOR ZED SIGNATUR

TO AVGID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/1998 Pay Telephone Provider Regulatory Assessment Fee Return

STATUS:	Florida Public Service Commission (See Filing Instructions on Back of Form)	FOR PSC USE ONLY Check# <u>3000</u>
	TG150 99 FF8 -1 MI II: 35 Florida Coast Systems Inc1 MI II: 35 520 S.E. 12th Street, #101 ROOM	\$ <u>50,00</u> 0603002 003001 \$ <u>P</u> 0603002 004011
PERIOD COVERED:	Dania, FL 33004-4630 DEPOSIT DATE	\$ I
10/08/1997 TO 12/31/1997 01/01/1998-to	D077 FEB 0 2 1999	Postmark Date <u>// 37/97</u> Initials of Preparer
12/31/1998	Please Complete Below If Official Mailing Address Has Changed	
(Name of Company)	(Address)	(City/State) (Zip)

LINE		
NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue	\$ 7,111765
2.	Gross Intrastate Revenue	1,27253
3.	LESS: Amounts Paid for Services to Local Telephone Companies (Attach Listing)*	(3,96441)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 4,42577
5.	Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)	G ⁶³
6.	Penalty for Late Payment	·
7.	Interest for Late Payment	
8.	TOTAL AMOUNT DUE	\$ 50 **
	AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS	RAR RICK Moses \$50
	THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUE	ES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return

*Each amount paid by a pay telephone company to a telecommunications company providing *local service* for use of the *local network* shall be deducted from intrastate revenue for purposes of determining the amount of the regulatory fee assessed the pay telephone company.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

1000 nna (Signature of Company Official) nne (Pleas APrint Name¥

President	1-27-99
(Title)	(Date)
Telephone Number <u>954922-976 Fax Number</u>	<u>,954 922-976</u> 4
F.E.I. No. 65-0767766	·····