Pay Telephone Service Provider Regulatory Assessment Fee Return ORIGINA TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2003 FOR PSC USE ONLY Check# /069 Florida Public Service Commission STATUS: (See Filing Instructions on Back of Form) Actual Return TG567-02-0-R 0603002 003001 Estimated Return Global Marketing & Sales, Inc. Amended Return 0603002 883 S.W. 179th Avenue .00 004011 Pembroke Pines, FL 33029-4432 DATE PERIOD COVERED: DEPOSIT 01/01/2002 TO 12/31/2002 APR 05 2002 CC: Initials of Preparer Please Complete Below If Official Mailing Address Has Changed 8K3 SW 179 AVE PEUBLOLE Virg (City/State) LINE NO. ACCOUNT CLASSIFICATION AMOUNT 1. Gross Operating Revenue (Florida) 2. Gross Intrastate Revenue 3. LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back) 4. TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3) 5. Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015) Penalty for Late Payment (see "3. Failure to File by Due Date" on back) 6. 7. Interest for Late Payment (see "3. Failure to File by Due Date" on back) 8. TOTAL AMOUNT DUE AUS AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$502 CAF THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED CMP COM CTR Number of pay telephones in operation at close of period covered **ECR** GCL _bv_this Return OPC MMS

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.

(Signature of Company Official)

Alp (Signature of Company Official)

105100ml

MARUT-EF-2002

(Preparer of Form - Please Print Name)

samounts must be intrastate only and must be verifiable.

Telephone Number (954) 436-1075

Fax Number (951/ 252-3776

F.E.I. No. _

DOCUMENT NUMBER - DATE

03848 APR-48

March 28, 2002

Ms. Paula J. Isler Research Assistant Public Service Commission

Dear Ms. Isler;

As per your letter dated March 21, 2002 and our telephone conversation attached you will find a check for the amount of \$56.00 which will cover the \$6.00 past due penalty and the \$50.00 RAF 2002 fee.

As stated in my previous correspondence I wish to cancel effective immediately the pay telephone certificate, please send me a cancellation confirmation notice for my records.

I thank you for your prompt respond and assistance.

Sincerely/

Alessio Pace

/President