

*Isler
Records*

T0378

Settlement Pymt

CA# 4007

CK \$ 500.00

11/1/03

RT

ORIGINAL



Publicall Telecommunications Inc
24 Dorset Court
Somerset, NJ 08873
Tel: (732) 296-7400 Fax: (732) 296-9799

October 31, 2003

DEPOSIT DATE

395 NOV 07 2003

Ms. Blanca Bayo
Director
Division of the Commission Clerk & Administrative Services
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

Re: Request to Keep Publicall Telecommunications Inc.
Certificate No. 5909

Dear Ms. Bayo:

Publicall Telecommunications Inc. ("Publicall") hereby notifies the Florida Public Service Commission of its request to keep Publicall Telecommunications' Certificate No. 5909 active, Publicall is proposing a settlement amount of \$500.00 to resolve Docket No. 030710-TC. In addition, Publicall has filed the Regulatory Assessment Fee Return ("RAF") and paid all past due regulatory assessment fees, plus penalty and interest charges for the calendar period ending December 31, 2002.

Upon review of the applicable laws and regulations of the State of Florida, Publicall has implemented operational and procedural controls to ensure future Regulatory Assessment Fee Returns are filed in a complete, accurate and timely manner. The new procedures and systems implemented should ensure timely filings of future RAF returns and prevent future late payments of regulatory assessment fees.

Furthermore, Publicall agrees to a waiver of objection to the administrative cancellation of the company's certificate in the event its offer is accepted and it fails to comply with the terms, which it has offered. If however, there is a factual dispute as to the manner or level of compliance with any provision in the settlement, Commission staff will bring the matter to the Commission for consideration.

Should you have any questions, please contact the undersigned.

- AUS
- CAF
- CMP
- COM
- CTR
- ECR
- GCL
- OPC
- MMS
- SEC
- OTH

Sincerely,

Ricardo Cumberbatch
President

DOCUMENT NUMBER-DATE

11090 NOV-6 03

FPSC-COMMISSION CLERK

Rec'd
IS/kr

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2003

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

Florida Public Service Commission
(See Filing Instructions on Back of Form)

TG378-02-0-R
 Publicall Telecommunications Inc
 24 Dorset Court
 Somerset, NJ 08873-2835
 DEPOSIT DATE
 395 NOV 4 2002
 Docket No. 030710-TC (Isler)

FOR PSC USE ONLY	
Check#	4006
\$	50.00
\$	12.50
\$	5.00
Postmark Date	11-1-03
Initials of Preparer	Rt

PERIOD COVERED:
01/01/2002 TO 12/31/2002

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 (Florida)	\$ 0
2.	Gross Intrastate Revenue	0
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(0)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 0
5.	Regulatory Assessment Fee Due -- (Multiply Line 4 by 0.0015)	0
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	0
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	0
8.	TOTAL AMOUNT DUE	\$ 0

AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50
 THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return 0

* These amounts must be intrastate only and must be verifiable.

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]
 (Signature of Company Official)
Jacqueline Cumberbatch
 (Preparer of Form - Please Print Name)

President 10/31/03
 (Title) (Date)
 Telephone Number 732 296-7400 Fax Number 732 296-9799
 F.E.I. No. 22-3511691

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September 2002



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Post Office Addressee

ORIGIN (POSTAL USE ONLY)			
PO ZIP Code 08873	Day of Delivery <input type="checkbox"/> Next <input checked="" type="checkbox"/> Second <input type="checkbox"/>	Flat Rate Envelope <input type="checkbox"/>	
Date In Mo. 11 Day 1 Year 03	<input type="checkbox"/> 12 Noon <input checked="" type="checkbox"/> 3 PM	Postage \$ 13.65	
Time In <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee	
Weight lbs. 3 ozs.	Int'l Alpha Country Code	COD Fee \$	Insurance Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials P	Total Postage \$ 13.65	

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	

CUSTOMER USE ONLY	
PAYMENT BY ACCOUNT Express Mail Corporate Acct. No.	<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if Waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.
Federal Agency Acct. No. or Postal Service Acct. No.	

FROM: (PLEASE PRINT) PHONE 732 296-7400
Jr. Cumberbatch
24 Dorset Court
Somerset, NJ 08873

NO DELIVERY
 Weekend Holiday Customer Signature

TO: (PLEASE PRINT) PHONE 850 413-6502
Paula Isler
Florida Public Service Comm
2540 Shumard Oak Blvd
Tallahassee, FL

3 2 3 9 9 + 0 8 5 0
ZIP + 4

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