

ORIGINAL

RI VED-FI

05 JAN 10 PM 2:51

COMMISSION CLERK

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 040963

Universal Phone Corporation
1100 N.W. 163rd Drive
Miami FL 33169-5816

2. Article Number
(Transfer from service label)

7002 0860 0001 1758 5019

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature Agent
 Addressee

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

State of Florida

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

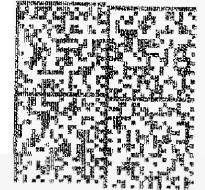


7002 0860 0001 1758 5019



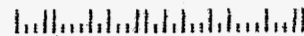
Universal Phone Corporation
1100 N.W. 163rd Drive
Miami FL 33169-5816

*Notified
12/6/04*



047J82004132
\$04.650
12/03/2004
Mailed From 32399
US POSTAGE

33169+5816 22



DOCUMENT NUMBER DATE

00319 JAN 10 '05

FPSC-COMMISSION CLERK

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