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PERIOD COVERED: 01/01/2006 TO 1231/2006 Los Angeles, CA 90025-6621 \$					003001		
PERIOD COVERED: 01/01/2006 TO 1231/2006 004011 Paulal Records Dedict # Construction (Name of Company) 004011 Please Complete Below If Official Mailing Address Has Changed Initials of Preparer Infiliate of Preparer Infiliates In		Amended Return		\$ E			
01/01/2006 TO 12/31/2006 Image: Complete Below If Official Mailing Address Has Changed S Image: Complete Below If Official Mailing Address Has Changed Postmark Date P-9.06 Initials of Preparer S Image: Complete Below If Official Mailing Address Has Changed (Name of Company) (Address) (City/Stat) Image: Complete Below If Official Mailing Address Has Changed LINE NO. ACCOUNT CLASSIFICATION AMOUNE 1. Gross Operating Revenue (Florida) S		DEDIOD COVEDED.		\$ P			
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1. Gross Operating Revenue (Florida) \$			ACCOUNT CLASSIFICATION		UNE		
2. Gross Intrastate Revenue CMP					<u> </u>		
CMP 3. LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ COM (see "2. Fees" on back) CTR 4. TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3) \$		1. Gross Operating	Revenue (Florida)	\$	- <u></u>		
COM (see "2. Fees" on back) () CTR 4. TOTAL REVENUES for Regulatory Assessment Fee Calculation () Image: Common com		2. Gross Intrastate F	levenue				
CTR 4. TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3) \$	CN	LESS. Amounts	▲				
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ECR	(CT	R 4. TOTAL REVEN	UES for Regulatory Assessment Fee Calculation				
GCL 5. Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020) OPC 6. Penalty for Late Payment (see "3. Failure to File by Due Date" on back) RCA 7. Interest for Late Payment (see "3. Failure to File by Due Date" on back) SCR 7. Interest for Late Payment (see "3. Failure to File by Due Date" on back) SCR 8. Extension Payment Fee (see "4. Extension" on back) SEC 9. TOTAL AMOUNT DUE (MINIMUM \$50.00) OTH TO. Number of pay telephones in operation at close of period covered by	E	(Line 2 less Line	3)	\$			
OPC -6. Penalty for Late Payment (see "3. Failure to File by Due Date" on back) RCA							
-0. Penalty for Late Payment (see "3. Failure to File by Due Date" on back) RCA	e	A <u>5.</u> Regulatory Asses	sment Fee Due - (<i>Multiply Line 4 by 0.0020</i>)				
SCR 7. Interest for Late Payment (see "3. Failure to File by Due Date" on back) SGA 8. Extension Payment Fee (see "4. Extension" on back) SEC 9. TOTAL AMOUNT DUE (MINIMUM \$50.00) OTH 10. Number of pay telephones in operation at close of period covered by		- Penalty for Late I	Payment (see "3. Failure to File by Due Date" on back)				
SCR	R		Designed (and 1/2) Entities to Ethe has Described and the state				
SECTOTAL AMOUNT DUE (MINIMUM \$50.00) \$50.00 ⁽²⁾	SC	CR	ayment (see 5. Failure to File by Due Date on back)				
OTHNumber of pay telephones in operation at close of period covered by	S	3A <u>8.</u> Extension Payme	nt Fee (see "4. Extension" on back)				
10. Number of pay telephones in operation at close of period covered by			NT DUE (MINIMUM \$50.00)	\$50	.00 (2)		
	0.	10. Number of pay te	lephones in operation at close of period covered by		·		

 These amounts must be <u>intrastate only</u> and must be verifiable (see "2. Fees" on back).
Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

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)	(Title)	(Date)
(Preparer of Form - Please Print Name)		2 Fax Number <u>407 740 - 0</u> 613
	F.E.I. No.	
PSC/CMP 026 (Rev. 01/05)	C:\DOCUME~1\pisler\LOCALS~1\Ten	DOCUMENT NUMBER - DATE np\foxmerge37845809\xxmergeformxx.doc 07294 AUG 15 8

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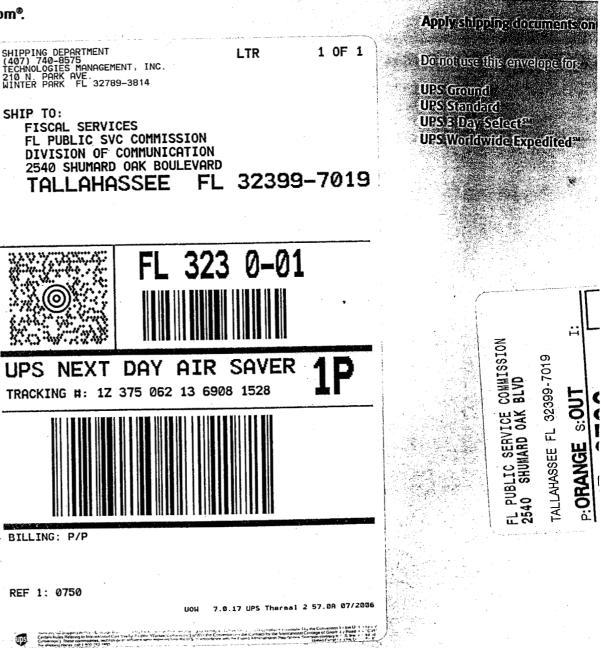
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Do not use UPS 2nd Day Air services to send letters weighing over 13 ounces in this envelope. For UPS 2nd Day Air services, UPS Express Envelopes weighing one pound or more are subject to the corresponding rates for the applicable weight.

Do not send cash or cash equivalent.

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	Florida Public Service Commission	FOR PSC USE ONLY
STATUS:	(See Filing Instructions on Back of Form)	Check # 42 822
Actual Return	TG476-05-0-R	\$ 50.00 06-03-00
Estimated Return	Public Communications Services, Inc.	00300
Amended Return	11859 Wilshire Blvd., Suite 600	\$_12.50_P
	Los Angeles, CA 90025-6621	06-03-00
PERIOD COVERED:		00401
01/01/2005 TO 12/31/2005		\$ <u>3</u> . 9 0 I
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outal fecordes	673 AUG 1 4 200F Docket # DLOY69-TC	Postmark Date $\underline{F} - \underline{9} - \underline{0}$ Initials of Preparer \underline{R}
which to	Please Complete Below If Official Mailing Address Has Changed	
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LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$
2.	Gross Intrastate Revenue	
3.	LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2. Fees" on back)	()
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (<i>Line 2 less Line 3</i>)	\$
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	
8.	Extension Payment Fee (see "4. Extension" on back)	
9.	TOTAL AMOUNT DUE (MINIMUM \$50.00)	\$65.50 (2)
10.	Number of pay telephones in operation at close of period covered by this Return	

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).

(2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

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)		(Title)	1 - 18 	(Date)
(Preparer of Form- Please Print Name)	Telephone Number	<u>407-7</u>	40 - ZOELS Numb	er <u>(407 - 746 - 06 B</u>
	F.E.I. No			