

Interexchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2007 TO 12/31/2007

TJ989-07-0-R 080143-77
 Cinergy Telecommunications, Inc.
 168 S.E. 1st Street, Suite 1106
 Miami, FL 33131-1403

DEPOSIT DATE:
 080143 8 28 MAR 11 2008

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY

Check # 3319
 \$ 700.00 06-03-001
 003001
 \$ _____ E
 \$ _____ P 06-03-001
 004011
 \$ _____ I

Postmark Date _____
 Initials of Preparer _____

RECEIVED - FPSC
 08 MAR 10 PM 2:46
 COMMISSION CLERK

Records + papers

 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Long Distance Services	\$ 0	\$ 0
2.	Access Services	0	0
3.	Private Line Services	0	0
4.	Leased Facilities & Circuits Services	0	0
5.	Miscellaneous Services	0	0
6.	TOTAL Telephone Services	\$ 0	\$ 0
7.	LESS: Amounts Paid to Telecommunications Companies ⁽¹⁾	(0)	(0)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation		\$ 0
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0020)		0
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)		0
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)		0
CMP2.	Extension Payment Fee (see "4. Extension" on back)		0
COM3.	TOTAL AMOUNT DUE (\$700.00 MINIMUM)		\$ <u>700.00</u> ⁽²⁾

CTR (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 \$700 shall be imposed as provided in Section 364.336, Florida Statutes.

CURRENT COMPANY STATUS

GCL Facilities-Based Carrier () Reseller () Call Aggregator
 ORC Alternate-Operator Service () Rebiller () Other: _____

BILLING INFORMATION

RCA Complete below if billing agent is other than yourself.
 SCR _____ (Name) _____ (Address: City/State/Zip) _____ (Telephone)

SGM What is the total amount of customer deposits collected? Amount: \$ _____ for 20 _____
 SEC What is the total amount of bond held (if applicable)? Amount: \$ _____ Expires: _____

COMPANY INFORMATION

OTH Do you lease telecommunications' facilities? () YES () NO
 If YES, who do you lease these facilities from? Name: _____
 Address: _____

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/her duty shall be guilty of a misdemeanor of the second degree.

Cecilia Zurita (Signature of Company Official) V. President (Title) 3/4/08 (Date)
Cecilia Zurita (Preparer of Form - Please Print Name) Telephone Number (305) 374-6898 Fax Number (305) 374-7747
 F.E.I. No. 65-1082633

DOCUMENT NUMBER - DATE
 01780 MAR 10 08

FPSC-COMMISSION CLERK



CINERGY
TELECOMMUNICATIONS, INC

March 5, 2008

080143

Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, FL. 32399-0850

RE: TJ989-07-0-R CERTIFICATE CANCELLATION REQUEST

Ms. Paula Easler:

Effective immediately, please cancel Florida Public Service Commission
Telecommunications Certificate issued to Cinergy Telecommunications Inc.

Enclosed, please find Cinergy's Interexchange Company Regulatory Assessment Fee
Return Application and a check for \$700.00 to cover the minimum fee. As of this date, the
company has no renew and is in the process of closing down.

Your prompt attention to this matter will be appreciated.

If you have any questions, please call 305.321.7070.

Sincerely,
Cinergy Telecommunications Inc.

Cecilia Zurita
Cecilia Zurita

DOCUMENT NUMBER - DATE

01780 MAR 10 08

FPSC-COMMISSION CLERK