

REQUEST TO ESTABLISH DOCKET

(Please type or print. File original *plus* 1 copy with CLK.)

Date:	1/28/2014	Docket No.:	DOCKET NO. 140023-TC
1. From Division / Staff:	Office Of Telecommunications/C.Beard, J.Bates		
2. OPR:	Catherine Beard, Jeff Bates, TEL <i>CB JB</i>		
3. OCR:	GCO		
4. Suggested Docket Title:	Request for cancellation of pay telephone certificate No. 3921 by SurfTel, Inc., effective <u>March 28, 2013.</u>		
5. Program/Module/Submodule Assignment:	B.1(K)		
6. Suggested Docket Mail List.			
a. Provide NAMES/ACRONYMS, if registered company.		<input type="checkbox"/> Provided as an Attachment	
Company Code, if applicable:	Parties (include address, if different from MCD):	Representatives (name and address):	
3921			
b. Provide COMPLETE NAME AND ADDRESS for all others. (match representatives to companies)			
Company Code, if applicable:	Interested persons, if any, (include address, if different from MCD):	Representatives (name and address):	
7. Check one:	<input checked="" type="checkbox"/> Supporting Documentation Attached		<input type="checkbox"/> To be provided with Recommendation
Comments: Company requested cancellation by letter included in the RAF payment in March of 2013. That request was not forwarded to TEL to docket for staff assignment to be cancelled. That letter is in the documentation attached.			

March 27, 2013

Florida Public Service Commission
2540 Shumard Oak Blvd
Tallahassee, FL 32399-0850
Attn:Fiscal Services/Ann Cole Comm Clerk

Dear Commission

Please accept this notice that SurfTel, Inc TF269 voluntarily requests the cancellation of the Pay Telephone Certificate required. SurfTel no longer has an inventory of public payphones available to the public. I have attached the 2012 and 2013 RAF documents with checks to cover the fees and penalty.

If you have questions, please reach me at 954 524 9999.

Sincerely,
Mara Dragoslavica .

X *Mara Dragoslavica*

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2014
Pay Telephone Service Provider Regulatory Assessment Fee Return

Total 212.00

Florida Public Service Commission

FOR PSC USE ONLY	
Check #	302030
\$ 100.00	06-03-001 003001
\$ _____	E
\$ _____	P 06-03-001 004011
\$ _____	I
Postmark Date	3-28-13
Initials of Preparer	RT

STATUS:

- Actual Return
- Estimated Return
- Amended Return

(See Filing Instructions on Back of Form)

TF269-13-0-R
 SurfTel, Inc.
 1800 West Broward Blvd.
 Ft. Lauderdale, FL 33312-1550

DATE DEPOSIT
 APR 02 2013 3 21

PERIOD COVERED:
 01/01/2013 TO 12/31/2013

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 ⁽¹⁾ (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 0.0016. If more than \$100, enter amount. If less, enter \$100.) ⁽²⁾	100 -
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.	Extension Payment Fee (see "4. Extension" on back)	- 0 -
9.	TOTAL AMOUNT DUE (Add lines 5 through 8)	\$ 100 -
10.	Number of pay telephones in operation at close of period covered by this Return	- 0 -

(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 \$100 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) off mgr (Title) 3/27/13 (Date)

Terri Drogoslavic
 (Preparer of Form - Please Print Name)

Telephone Number 954 724 9999 Fax Number 954 524 5414

F.E.I. No. 656546686