



**ORIGINAL  
FILE COPY**

May 21, 1991

Director of Records and Reporting  
Florida Public Service Commission  
101 East Gaines Street  
Tallahassee, Florida 32399-0850

*910184-TC*

To Whom it may Concern:

Please find enclosed a copy of the only annual report that has been sent to me. Atlantic Business Communications, Inc. is an independent telephone interconnect company. We have not sold nor have we serviced any pay telephone equipment in the past. We would like to remain a member of the PSC but we are not selling/servicing pay telephone equipment at this time. Please let me know how I can clear up this problem. You may contact me anytime at 1-800-749-0399 or (813) 622-7283.

Sincerely,

Daniel C. Botbol  
Vice President

Enclosures

DB/sdp

ACK   
AFA \_\_\_\_\_  
APP \_\_\_\_\_  
CAF \_\_\_\_\_  
CMU   
CTR \_\_\_\_\_  
EAG \_\_\_\_\_  
LEG   
LIN \_\_\_\_\_  
OPC \_\_\_\_\_  
RCH \_\_\_\_\_  
SEC   
WAS \_\_\_\_\_

DOCUMENT NUMBER: DATE  
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PSC-RECORDS/REPORTING

State of Florida



Commissioners:  
MICHAEL McK. WILSON, CHAIRMAN  
THOMAS M. BEARD  
BETTY EASLEY  
GERALD L. (JERRY) GUNTER  
JOHN T. HERNDON

DIVISION OF COMMUNICATIONS  
DIRECTOR, WALTER D'HAESELEER  
(904) 488-1280

## Public Service Commission

December 21, 1989

Dear PATS Provider:

As a certificated pay telephone service (PATS) provider, you are required to meet certain reporting requirements as specified by Rule 25-24.520.

Attached is the format for your Annual Pay Telephone Service Report. This information must be provided to the Division of Communications by January 31, 1990.

You are also required to provide your local exchange company (LEC) with a listing of your PATS locations and telephone numbers by January 31, 1990. Please mail an additional copy of this information with your Annual Pay Telephone Service Report to the Division of Communications as well.

Please call me at (904) 488-1280, if you have questions.

Sincerely,

A handwritten signature in cursive script that reads "Pamela Austin".

Pamela Austin  
Regulatory Analyst  
Bureau of Service Evaluation

PA/emd  
Attachment: Format for Annual PATS Report  
cc: All Florida Local Exchange Companies  
0816c(1)

ANNUAL  
PAY TELEPHONE SERVICE REPORT

1. Certificate Number 2318  
~~Atlantic Business~~
2. Certificate Holder Communications, Inc.  
Name 505-B Brockbridge Parkway  
Address Tampa, FL 33610  
(813) 622-7283 1-(800) 272-8396
3. Individual Responsible for contact  
Name Daniel C. Botbol
4. Number of instruments in place December 31, 1989 0
5. Currently providing service Yes  No
6. If the answer to question number 5 is no what was the last date that service was provided N/A
7. If the answer to question 5 is no what are your plans for providing service in the future.  
Implementing direct sales force

Return to: Florida Public Service Commission  
Division of Communications  
101 East Gaines Street  
Tallahassee, Florida 32399-0866

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

# Pay Telephone Service Provider Regulatory Assessment Fee Return

## Florida Public Service Commission

(Instructions For Filing On Back of Form)

**STATUS:**

Actual Return  
Estimated Return

PERIOD COVERED: Jan 1 to June 30

TELECOMMUNICATIONS  
ATLANTIC BUSINESS CORPORATION, I  
5805-B BRECKENRIDGE PARKWAY  
TAMPA, FL 33610-4258

FOR PSC USE ONLY  
\$ \_\_\_\_\_ 0603002  
\_\_\_\_\_ 003001  
\$ \_\_\_\_\_ P  
\_\_\_\_\_ 0603002  
\_\_\_\_\_ 004010  
\$ \_\_\_\_\_ I

Complete Below If Address Has Changed

Utility Name \_\_\_\_\_ Address \_\_\_\_\_ City / State \_\_\_\_\_ Zip Code \_\_\_\_\_

NOTE: NO PAY TELEPHONE REVENUES THIS YEAR

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue	\$ - 0 -
2.	Gross Intrastate Revenue	- 0 -
3.	Regulatory Assessment Fee Due* ( 1/8 of 1% of Line 2 )	\$ - 0 -
4.	LESS: APPROVED Prior-Period Overpayment	\$( - 0 - )
5.	NET REGULATORY ASSESSMENT FEE DUE	\$ - 0 -
6.	Penalty For Late Payment	- 0 -
7.	Interest For Late Payment	- 0 -
8.	TOTAL AMOUNT DUE	\$ - 0 -

AS PROVIDED IN SECTION 350.113, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$25.00 + THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

I, the undersigned owner / officer of the above-named utility, have read the foregoing. Under penalties of perjury, I declare that, to the best of my knowledge and belief, the above is a true and correct statement of gross revenues derived from intrastate business for the period indicated.  
Utility Official: DANIEL BOTBOL (Signature) 7-5-90 (Date) 7283 (Title)  
(Name - Please Print) Telephone Number (513) 622-7283