REQUEST TO ESTABLISH DOCKET

	(PLEASE TIPE)
at	Docket No. 980790 -
	Division Heme/Steff Heme Communications/Isler
	GPR Communications/Isler
	OCR_ Legal Services
	Suggested Docket TitleCancellation by Florida Public Service Commission of Pay Telephone Certificat
um	ber 3288 Issued to Clean Machine/Laundry Service of Mismi Reach, Inc. for Violation of Rules 25-4,0161.
	.C., Regulatory Assessment Fees; Telecommunications Companies
	Suggested Docket Hailing List (attach separate sheet if necessary)
	A. Provide MANES ONLY for regulated companies or ACRONYMS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C. B. Provide COMPLETE name and address for all others. (<u>Match representatives to clients.</u>)
	1. Parties and their representatives (if any)
CI	ean Machine/Laundry Service of Mismi Beach, Inc.
	2. Interested Persons and their representatives (if any)
_	
6.	Check one: XX Documentation is attached.
	Documentation will be provided with recommendation.
200	
1:1	PSC\RAR\MP\ESTDKT.

PSC/RAR 10 (Revised 01/96)

06758-JUN 26 2

FPSC RECORD GENERALING

Clean Machine/Laundry Service of Miami Beach, Inc. (TE758)
Pay Telephone Certificate Number 3288

- 12/13/97 The USPS returned the return receipt showing that the RAFs notice was delivered to the company on 12/13/97. The receipt was initialed but it is illegible.
- 06/05/97 Division of Administration advised staff to cancel the company's certificate for nonpayment of RAF fees. The company owes \$121.50, detailed as follows:
- \$ 2.50 1993 Penalty
 - .50 1993 Interest
 - 2.50 1996 Penalty
 - .50 1996 Interest
 - 50.00 1997 RAFs
 - 12.50 1997 Penalty
 - 3.00 1997 Interest
- 50.00 1998 RAFs
- \$121.50 Total due

STATE OF THE STATE	100 mm	2 = 0 0 0 0 0	121	
112	538	E 20	622	
12)	123	nigh	18 P	128
100 Per 100 Pe	8 2 2 2		1111	BARN.
§ 0 E	101	§ 0 E	105	3.
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	2 · · · · · · · · · · · · · · · · · · ·	252	So West Pot Si
E STATE	Marie Comments	MANAGEMENT OF THE PARTY OF THE	S S S S S S S S S S S S S S S S S S S	1 3
2	11	12	100	101
NO STATE OF THE PERSON NAMED IN COLUMN NAMED I	11	A STATE OF THE PERSON NAMED IN	10 mm	1244
4 5	¥ 2	10	1	The contract of the contract o
PART IN SEC.	Table of the state	0000 T	J 18	10
11	111	110	1 1	12
111	111	111	BEN BE	į p
111 65 ×	J. Sien	3 3 1	S COLUMN S S S S S S S S S S S S S S S S S S S	a a a a a a a a a a a a a a a a a a a
110	11. 20.	1 g	選を 選手	83 E8
3 1	3 1 1	D THE REAL PROPERTY.	9 00 00 00 00 00 00 00 00 00 00 00 00 00	220 22
A COLL PER PARTIENT ARCONT	A COLL PER PRENENT AND A COLL PER PRENENT PER PER PER PER PER PER PER PER PER PER	A STREET, TO COLLAND PROPERTY	NAME OF STREET	1 1 1 1
THE PROPERTY OF THE PROPERTY O		Sales		ēķe.
West of the last o	11		11	B. Called B. Cal
-13[- 4 2 2		- 22 2	- 13
3 1 1	3 8 8	1 11	288	1000
4	2 Si	11	18	31
See of the	- 10	#2 A	· · · · · · · · · · · · · · · · · · ·	81
One and	8 1	and the second		1
\$ 10 p	88 5	\$8 g	8 H EZ	88 gg

200	97.	1	
NAME OF THE PERSON NAME OF THE P	122	625	
ancer ancer	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	THE PERSON NAMED IN COLUMN NAM	
101	10B	101 110	
150	100	151	
12	100	12	
	11	11	
THE SOURCE STATES	PARTY PROTEST OF THE PARTY PRO		
11,1	11	88	
111	115	252	
100 M	3 0	3[4	
g g g	18 E	\$ \frac{1}{2} \text{\$\ext{\$\text{\$\ext{\$\text{\$\}\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\tex{\$\text{\$\text{\$\text{\$\exititt{\$\text{\$\text{\$\text{\$\text{\$\tex	
A SA	AMERICAN PROPERTY OF THE PERTY	E SERVICE DE LA COMPANSION DE LA COMPANS	
and the second		The second secon	
- A	150 150 150 150 150	12 12 12 12 12 12 12 12	
6 E	\$10 810	85	
Commune and section forms to the section of the sec	11	B N	
\$ E	10	10	

SENDER: Complete items 1 and/or 2 for additional sorvices. Complete items 3, 46, and 4b. Print your name and address on the reverse of this form so that card to you. Attach this form to the front of the malipleos, or on the back if a parmit. Write "Return Receipt Requested" on the malipleos below the a "The Return Receipt Requested" when the article was delivered delivered.	i also wish to receive the following services (for an extra fee): 1. Addresses's Address 2. Restricted Delivery Consult postmaster for fee.	
TE 758	7. Date of D	Type red Certified Mail Insured socipt for Merchandes COO
Received By: (Print Name) Signature: (Affiresses or Agent)	8. Addressee's Address (Only if requested and fee is paid)	