

291849-TI

ORIGINAL

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 02/01/1999

Interexchange Company Regulatory Assessment Fee Return

CK Amt #125.50

STATUS:

Actual Return
Estimated Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TJ153
Public Telephone Network, Inc.
6015 NW 7th Avenue
Miami, FL 33127-DEPOSIT
DATE MAR 24 2000
D268

FOR PSC USE ONLY
Check# 2202
\$ 50.00
\$ 12.50
\$ 7.00
Postmark Date 3/22/00
Initials of Preparer MC

PERIOD COVERED:

11/03/98 TO 12/31/98

Please Complete Below if Official Mailing Address Has Changed

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

Table with columns: LINE NO., ACCOUNT CLASSIFICATION, GROSS OPERATING REVENUE, INTRASTATE REVENUE. Rows include Long Distance Services, Access Services, Private Line Services, Leased Facilities & Circuits Services, Miscellaneous Services, TOTAL Telephone Services, LESS: Amounts Paid For Services To Local Telephone Companies, TOTAL REVENUES For Regulatory Assessment Fee Calculation, Regulatory Assessment Fee Due, Penalty for Late Payment, Interest for Late Payment, TOTAL AMOUNT DUE.

P. Isler
RJR
Nonye

AFA
APP
CAF
CMU
CTR
EAG
EG
MAS
OPC
RRR
SEC
WAW
OTH

Each amount paid by an interexchange telecommunications company to a telecommunications company providing local service for use of the local network shall be deducted from intrastate revenue for purposes of determining the amount of the regulatory fee assessed the interexchange telecommunications company.

AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

CURRENT COMPANY STATUS

Facilities-Based Carrier ( ) Reseller ( ) Call Aggregator
Alternate-Operator Service ( ) Reseller ( ) Other:

BILLING INFORMATION

Complete below if billing agent if other than yourself.

ORIGINAL DOCUMENT IS PRINTED ON CHEMICAL REACTIVE PAPER & HAS A MICROPRINTED BORDER

KNOWLES MARKS & RANDOLPH, P.A.
TRUST ACCOUNT
215 SOUTH MONROE STREET, SUITE 130
TALLAHASSEE, FLORIDA 32301
(850) 222-3768

AMSOUTH

AMSOUTH BANK OF FLORIDA
1859-B CAPITAL CIRCLE, NE
TALLAHASSEE, FL 32308
63-1011/632

2202

3/22/2000

PAY TO THE ORDER OF Florida Public Service Commission

\$ \*\*125.50

One Hundred Twenty-Five and 50/100\*\*\*\*\* DOLLARS

Florida Public Service Commission

REDACTED
DOCUMENT NUMBER-DATE
03703 MAR 23 2000

Handwritten signature

MEMO '98 and '99 Regulatory Assessment Fees - Public Telephone Net

THE REVERSE SIDE OF THIS DOCUMENT INCLUDES AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

# Interexchange Company Regulatory Assessment Fee Return

CK Amt \$125.50

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:

01/01/99 TO 12/31/99

## Florida Public Service Commission

(See Filing Instructions on Back of Form)

DATE
TJ153 D266 - MAR 24 2000
Public Telephone Network, Inc. 6015 NW 7th Avenue Miami, FL 33127-1109

FOR PSC USE ONLY	
Check# 2202	
\$ 50.00	0603001
\$ 5.00	003001
\$ 1.00	0603001
	004011
Postmark Date 3/22/00	
Initials of Preparer MC	

Please Complete Below If Official Mailing Address Has Changed

(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 Other Telecommunications Companies* (see "2. Fees" on back)	( )	( )
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation		
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)		
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)		
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)		
12.	TOTAL AMOUNT DUE		\$

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\* These amounts must be intrastate only and must be verifiable.

AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

### CURRENT COMPANY STATUS

- Facilities-Based Carrier
- Reseller
- Call Aggregator
- Alternate-Operator Service
- Rebiller
- Other: \_\_\_\_\_

### BILLING INFORMATION

Complete below if billing agent if other than yourself.

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2202

3/22/2000

PAY TO THE ORDER OF Florida Public Service Commission

\$ \*\*125.50

One Hundred Twenty-Five and 50/100\*\*\*\*\* DOLLARS

Florida Public Service Commission

DOCUMENT NUMBER-DATE

MEMO '98 and '99 Regulatory Assessment Fees Public Telephone Net 03703 MAR 20 2000

THE REVERSE SIDE OF THIS DOCUMENT INCLUDES AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

KNOWLES, MARKS, & RANDOLPH, P.A.



• ATTORNEYS AT LAW •

215 SOUTH MONROE STREET • SUITE 130  
TALLAHASSEE, FLORIDA 32301  
TELEPHONE: (850) 222-3768 • FAX: (850) 561-0397  
www.kmrlaw.com

RJR  
RECEIVED  
FLORIDA PUBLIC  
SERVICE COMMISSION  
00 MAR 23 AM 8:20  
MAIL ROOM

HAROLD M. KNOWLES  
JOHN R. MARKS, III

ROOSEVELT RANDOLPH  
JEREMY E. COHEN

March 22, 2000

Ms. Blanca Bayo, Director  
Division of Records and Reporting  
Florida Public Service Commission  
2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

Re: Docket No. 991849-TI - Public Telephone Network

Dear Ms. Bayo:

On behalf of Public Telephone Network (PTN), attached is a settlement offer in the above referenced docket. If PTN needs to provide any additional information, please do not hesitate to contact the undersigned.

Sincerely,

A handwritten signature in black ink, appearing to be 'JRM', written over a horizontal line. The signature is fluid and cursive.

John R. Marks, III

JRM/lcg

Attachment

cc: Garth Reeves

DOCUMENT NUMBER - DATE

03703 MAR 23 8

FPSC-RECORDS/REPORTING

**Docket No. 991849-TI**

- Steps taken to prevent late payment of Regulatory Assessment Fees:

Public Telephone Network or PTN has reorganized its senior staff to address matters related to reporting requirements.

- PTN's new address is as follows:

900 Northwest 54th Street  
Miami, Florida 33127  
Telephone No. 305-754-4200

See attached 2000 Uniform Business Report, document No. K61720.

- Report of Changes:

With the reorganization of the senior staff, PTN will report any changes in status within ten (10) days of the changes.

- Settlement Proposal:

PTN offers to settle this matter with a \$100.00 fine per violation, i.e. \$200.00.

- Enclosed is a check for \$125.50 for payment of both the 1998 and 1999 Regulatory Assessment Fees.

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K61720

1. Entity Name

PUBLIC TELEPHONE NETWORK, INC.

Principal Place of Business

Mailing Address

6015 NORTHWEST 7TH AVENUE  
MIAMI FL 33127

P.O. BOX 470823  
MIAMI FL 33247-0823

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
MIAMI FL

Zip

Country

Zip  
33127

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0200945

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAUGHTREY, NEWALL J  
5400 NW 22ND AVE  
STE 706  
MIAMI FL 33142

Name

REEVES, RACHEL J.

Street Address (P.O. Box Number is Not Acceptable)

900 NW 54 ST.

M

City

MIAMI

FL

Zip Code

33127

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

*Garth C. Reeves*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/6/00

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DAUGHTREY, NEWALL J 2331 N.W. 140TH STREET OPA-LOCKA FL 33054 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD REEVES, GARTH C 900 N.W. 54TH STREET MIAMI FL 33127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE CHAIRMAN/DIRECTOR REEVES, RACHEL J. 900 NW 54 ST MIAMI, FL 33127 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Garth C. Reeves*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
GARTH C. REEVES

2/6/00

Date

305-754-4200

Daytime Phone #

CR2E034 (9/99)

PROCL-ET