

State of Florida
-M-E-M-O-R-A-N-D-U-M-



Public Service Commission

DATE: December 27, 2000
TO: Docket File
FROM: Division of Regulatory Oversight (Hoppe/McCoy) *JM*
Division of Legal Services (Fordham/Elliott) *JRE*
RE: Docket No. 001749-TC - Request for Voluntary Cancellation of PATS
Certificate No. 7148, effective 12/1/00.

By letter date stamped December 1, 2000, Hagop Nazarian, holder of Pay Telephone Certificate (PATS) of Public Convenience and Necessity No. 7148, has requested the cancellation of PATS Certificate No. 7148. Hagop Nazarian has complied with the provision of Rule 25-24.514(2), Florida Administrative Code, by providing adequate notice in writing of its request for cancellation of its PATS certificate and by submitting its Regulatory Assessment Fees for 2000.

As outlined in Chapter 2.07, Section C.16 of the Administrative Procedures Manual, our review results in our recommendation that the voluntary cancellation should be approved; an administrative order be issued; and the docket be closed.

Attachments

cc: Division of Records & Reporting
McCoy-RGO
Elliott-LEG

APP _____
CAF _____
CMP _____
COM _____
CTR _____
ECR _____
LEG _____
OPC _____
PAI _____
RGO _____
SEC _____
SER _____
OTH _____

DOCUMENT NUMBER-DATE
00249 JAN-50
FPSC-RECORDS/REPORTING

To whom it may concern,

001749-TC

I Hagop Nazarian wish to cancel my certificate to provide payphone service in Florida. My certificate # is 7148 and the name the certificate is under is Hagop Nazarian. Thank you.

Sincerely,

Hagop Nazarian

RECEIVED FPSC
00 DEC -1 AM 11:32
RECORDS AND
REPORTING

RECEIVED

DEC 05 2000

Florida Public Service Commission
Division of Regulatory Oversight

DOCUMENT NUMBER-DATE

15496 DEC-48

FPSC-RECORDS/REPORTING

HACOP K. NAZARIAN 05-98
PH. 305-847-8501
7601 E. TREASURE DR., #1612
N. BAY VILLAGE, FL 33141

63-27/631
982

428

DATE 12/19/00

Pay to the Order of Florida Public Service Commission

50.00

Fifty Dollars ¹⁰⁰

Dollars

NationsBank

NationsBank, N.A.
Florida

For

Hropman

⑆053100277⑆ 003430413497⑆ 0428

ATTN: Toni

Thanks For all your help, Hagep.

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 1/30/2001

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2000 TO
12/31/2000

Florida Public Service Commission
(See Filing Instructions on Back of Form)

TG602
Hagop Nazarian
345 Minola Drive
Miami Springs, FL 33166-6033

FOR PSC USE ONLY	
Check#	
\$	0603002
	003001
\$	P
	0603002
	004011
\$	1
Postmark Date	
Initials of Preparer	

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)	\$ 0.00
2.	Gross Intrastate Revenue	0.00
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(0.00)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 0.00
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)	0.00
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	0.00
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	0.00
8.	TOTAL AMOUNT DUE	\$ 50.00

Did not operate pay phones with a gain this year no longer in business

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

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return 0

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

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.

Hagop Nazarian
Signature of Company Official

president
(Title)

12/19/00
(Date)

Hagop Nazarian
(Preparer of Form - Please Print Name)

Telephone Number (305) 425-7272 Fax Number ()

F.E.I. No. _____