

Pay Telephone Service Provider Regulatory Assessment Fee Return

010442-TC

94,96,99 & 2000

STATUS:

RDR Pocket 010442

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

- Actual Return
- Estimated Return
- Amended Return

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

TF098
 Sharky's Draft House, Inc. ORIGINAL
 1623 North U.S. 1, Suite A-3
 Sebastian, FL 32958-3879
 DEPOSIT DATE
 0085 MAY 04 2001

FOR PSC USE ONLY
 Check# 8393
 \$ 50.00 0603002
 \$ 15.00 003001
 \$ 3.00 0603002
 004011
 Postmark Date 4/30/01
 Initials of Preparer MK

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)	\$ 129.00
2.	Gross Intrastate Revenue	
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 129.00
5.	Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)	5.00
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	7.50
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	1.50
8.	TOTAL AMOUNT DUE	\$ 68.00

94-2.50/50
 96-2.50/50
 99-2.50/50

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

- APP _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- LE _____
- OPC _____
- PAI _____
- PGO _____
- SEC _____
- SEP _____
- OTH _____

Number of pay telephones in operation at close of period covered by this Return one

These amounts must be intrastate only and cannot 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 337.06, 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.

Bonnie Williams
 (Signature of Company Official)
Bonnie Williams
 (Preparer of Form - Please Print Name)

VP (Title) 4/29/01 (Date)
 Telephone Number 561-589-8707 Fax Number _____
 F.B.I. No. 59-3137850

SHARKY'S DRAFT HOUSE
1623 N US ONE SEBASTIAN FL 32958
561 589.8906

April 29, 2001

Public Service Commission
Division of Records
2540 Shumard Oak Blvd
Tallahassee, FL 32399-0850

Docket # 010442-TC

Dear Ms. Bayo,

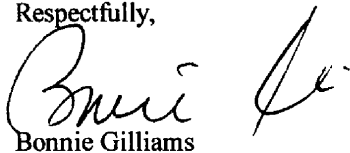
Apparently I was not fully aware of the outstanding report regards to my pay phone.

This past November my bookkeeper of eight years had to resign without any notice due to her past cancer and health condition. I care for all the paperwork for seven companies and it is quite a demanding job. Along with the additional work load I had to consume, I also have a family to care for.

I have filed the fee return and paid the fee with penalty and interest. I also suppose I need to pay a fine. However, if there is a possibility to waive the fine, as I have had a hardship with the loss of my employee and not being able to have time to train, and having to jump in the hotseat taking away from my own income has been very difficult this year. Financially I am having a hard time, and also this pay phone is broken and my husband was just going to eliminate the phone, I convinced him to keep it.

Thank you for your consideration to this matter.

Respectfully,


Bonnie Gilliams

30 11 01 04 11110