

**REQUEST TO ESTABLISH DOCKET**

(PLEASE TYPE)

Date 2/12/02

Docket No. 020118-TC

1. Division Name/Staff Name Division of Competitive Markets & Enforcement/McCoy

2. OPR CMP/McCoy *DM*

3. OCR Legal Services

4. Suggested Docket Title Request for Cancellation of Pay Telephone Certificate No. 3636

E. & H. Tel, Inc., effective 12/31/01.

5. Suggested Docket Mailing List (attach separate sheet if necessary)

A. Provide NAMES 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. (Match representatives to clients.)

1. Parties and their representatives (if any)


2. Interested Persons and their representatives (if any)


6. Check one:

Documentation is attached.

Documentation will be provided with recommendation.

I:\PSC\RAR\WP\ESTDKT.

PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER - DATE

01679 FEB 13 08

FPSC-COMMISSION CLERK

COMPANY IDENTIFICATION

Printed on 02/12/2002 at 12:01:02 by TJM

Complete Name: E. & H. Tel, Inc.

Mailing Name: E. & H. Tel, Inc.

Company Code: TE932 FEID Number: 65-0377689

COMPANY INFORMATION

Address Line 1: 2651 South Course Drive, Suite 109

Address Line 2:

City: Pompano Beach State: FL Zip Code: 33069-3963

Reg. Date: 11/24/1993 Inactive Date:

Transferred To:

Trans. From:

Certificate 1: 3636 Certificate 2:

Corporate Type:

Service 1: PAT - Pay Telephone

Service 2:

Service 3:

Service 4:

Class (WAW):

Phone Count: 9

County 1: County 2:

County 3: County 4:

Bankruptcy: No

COMPANY IDENTIFICATION

Printed on 02/12/2002 at 12:00:58 by TJM

Complete Name: E. & H. Tel, Inc.

Mailing Name: E. & H. Tel, Inc.

Company Code: TE932 FEID Number: 65-0377689

MAILING INFORMATION

Attention:

Address Line 1: 2651 South Course Drive, Suite 109

Address Line 2:

City: Pompano Beach State: FL Zip Code: 33069-3963

E-mail Address:

Web Address:

Liaison 1: Hal Kessler Liaison 2:

Title: Vice President Title:

Phone: (954) 975-6960 Phone:

E-mail: E-mail:

Fax 1: (954) 975-6960 Fax 2:

County:

28/14

COMPANY NAME: E. & H. Tel, Inc. CO. CODE: TE932

COMPANY LIAISON: Hal Kessler, VP; Elayne Kessler, President

DOCKET NO.: \_\_\_\_\_ CERTIFICATE NO.: 3636 EFFECTIVE: 11/24/93

RAF RETURN NOTICE: \_\_\_\_\_

DELINQUENT NOTICE: \_\_\_\_\_

OTHER RETURNED MAIL: \_\_\_\_\_

RAR'S RETURNED MAIL: \_\_\_\_\_

YEAR(s) RAFs NOT PAID: \_\_\_\_\_

YEAR(s) PENALTIES & INTEREST NOT PAID: \_\_\_\_\_

REVENUES/YEAR: \_\_\_\_\_

DATE LOTUS CHECKED FOR PAYMENT: \_\_\_\_\_

**OTHER INFORMATION**

01/10/02 - CCA provided me a copy of a letter from Ms. Kessler, originally  
received 12/27/01. The letter advised that the corporation was  
voluntarily dissolved on 3/15/01.

01/16/02 - Wrote company and advised the 2001 RAF needed to be paid before  
a voluntary cancellation could be granted. Response due 1/30/02.

1/25/02 - EK called @ 9:19 am. She will send the  
RAF form & \$50 min. by 1/30.

*See Pg. 2*

1/30/02 - From Co. - CK for \$50 for 2001 RAF.

2/6/02 - Forwarded file to JG for handling.

Voluntary cancellation, Eff. 12/31/01.

**COMPANY IDENTIFICATION**

Printed on 02/06/2002 at 14:25:55 by PJI

Complete Name: E. & H. Tel, Inc.

Mailing Name: E. & H. Tel, Inc.

Company Code: TE932                      FEID Number: 65-0377689

**RAF ACCOUNT FOR THE PERIOD 01/01/2001 THROUGH 12/31/2001**

Reg. Date: 11/24/1993                      Inactive Date:  
 Service: PAT - Pay Telephone  
 Received: Actual RAF Form  
 Status: Satisfied  
 Amended: No                                  Extension: No  
 Frozen: No                                    Comments: No  
 Payment Count: 1 Payment Made to Date  
 Operating Rev:                              \$0.00                      Interstate Rev:                              \$0.00  
 RAF Rate: 0.0015                              Net RAF Due:                              \$50.00

Assessment	Due	Paid	Owe
RAF	\$50.00	\$50.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
<b>Total</b>	<b>\$50.00</b>	<b>\$50.00</b>	<b>\$0.00</b>

Last modification was made on Thursday, January 31, 2002 at 3:48 PM by Jackie Knight

Period covered: 01/01/2001 through 12/31/2001                      RAF rate: 0.0015  
 Operating revenue:                              \$0.00  
 Documents: Actual RAF form received on 01/26/2002  
                   RAF form mailed on 01/16/2002  
                   RAF form mailed on 12/06/2001

Postmarked	Trans Date	Date Posted-By	Dep #	Check #	Check Amount
01/26/2002	01/30/2002	01/31/2002-JIK	HG161	137	\$50.00
	RAF paid		HG161		\$50.00

STATE OF FLORIDA

COMMISSIONERS:  
LILA A. JABER, CHAIRMAN  
J. TERRY DEASON  
BRAULIO L. BAEZ  
MICHAEL A. PALECKI  
RUDOLPH "RUDY" BRADLEY



DIVISION OF COMPETITIVE SERVICES  
WALTER D'HAESELEER  
(850) 413-6600

## Public Service Commission

January 17, 2002

Ms. Elayne Kessler, President  
E. & H. Tel, Inc.  
2651 South Course Drive, Suite 109  
Pompano Beach, FL 33069-3963

Dear Ms. Kessler:

On December 27, 2001, the Commission received your letter advising that the company was dissolved on March 15, 2001. Although you did not specifically request cancellation of your pay telephone certificate, it appears that is what you are requesting.

The effective date of a voluntary cancellation is the date the Commission received the company's request for cancellation. In this case, the Commission received your request in December 2001, therefore, the company will only owe the 2001 Regulatory Assessment Fee (RAF). The 2001 RAF form is enclosed.

Once the 2001 RAF is paid (due by January 30, 2002), then the Commission will voluntarily cancel the certificate with an effective date of December 27, 2001. If you have any questions, just let me know. I can be reached at (850) 413-6502-voice, (850) 413-6503-fax, by internet e-mail at [pisler@psc.state.fl.us](mailto:pisler@psc.state.fl.us), or at the address below.

Sincerely,

A handwritten signature in cursive script that reads "Paula J. Isler".

Paula J. Isler, Research Assistant  
Bureau of Service Quality

Enclosure

# Pay Telephone Service Provider Regulatory Assessment Fee Return

**STATUS:**

- Actual Return
- Estimated Return
- Amended Return

**PERIOD COVERED:**  
01/01/2001 TO 12/31/2001

## Florida Public Service Commission

(See Filing Instructions on Back of Form)

TE932-01-0-R  
 E. & H. Tel, Inc.  
 2651 South Course Drive, Suite 109  
 Pompano Beach, FL 33069-3963

Please Complete Below If Official Mailing Address Has Changed

**FOR PSC USE ONLY**

Check# \_\_\_\_\_

\$ \_\_\_\_\_ 0603002  
 \_\_\_\_\_ 003001

\$ \_\_\_\_\_ P  
 \_\_\_\_\_ 0603002  
 \_\_\_\_\_ 004011

\$ \_\_\_\_\_ I

Postmark Date \_\_\_\_\_

Initials of Preparer \_\_\_\_\_

\_\_\_\_\_  
(Name of Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State)

\_\_\_\_\_  
(Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ _____
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	( _____ )
4.	<b>TOTAL REVENUES for Regulatory Assessment Fee Calculation</b> (Line 2 less Line 3)	\$ _____
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)	_____
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____
8.	<b>TOTAL AMOUNT DUE</b>	\$ _____

**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 \_\_\_\_\_

\* 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.

\_\_\_\_\_  
(Signature of Company Official)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Preparer of Form - Please Print Name)

Telephone Number ( ) \_\_\_\_\_

Fax Number ( ) \_\_\_\_\_

F.E.I. No. \_\_\_\_\_



**FLORIDA PUBLIC SERVICE COMMISSION**  
Instructions For Filing Regulatory Assessment Fee Return  
(Pay Telephone Service Provider)

1. **WHEN TO FILE:** For companies which owed a total of \$10,000 or more of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return and payment must be filed or postmarked:

*On or before July 30 for the six-month period January 1 through June 30, AND  
On or before January 30 for the six-month period July 1 through December 31.*

For companies which owed a total of less than \$10,000 of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return and payment must be filed or postmarked:

*On or before January 30 for the prior twelve-month period January 1 through December 31.*

However, if July 30 or January 30 falls on a Saturday, Sunday, or holiday, the Regulatory Assessment Fee may be filed or postmarked on the next business day, without penalty.

2. **FEES:** Each company shall pay 0.0015 of its gross operating revenues derived from intrastate business, as referenced in Rule 25-4.0161(1), F.A.C. Gross Operating Revenues are defined as the total revenues before expenses. Gross Intrastate Operating Revenues are defined as revenues from calls originating and terminating within Florida. Do not deduct any expenses, taxes, or uncollectibles from these amounts other than the amount on Line 3.

On Line 3, deduct any amount paid to another telecommunications company for the use of any telecommunications network (including installation charges) to provide service to its customers. ***Do not deduct any taxes, federal subscriber line charges, interstate long distance access charges, or amounts paid for nonregulated services such as voice mail, inside wire maintenance, or equipment purchases/rentals.*** **DEDUCTIONS MUST BE INTRASTATE ONLY AND MUST BE VERIFIABLE.**

3. **FAILURE TO FILE BY DUE DATE:** Failure to file a return by the established due date will result in a penalty being added to the amount of fee due, 5% for each 30 days or fraction thereof, not to exceed a total penalty of 25% (Line 6). In addition, interest shall be added in the amount of 1% for each 30 days or fraction thereof, not to exceed a total of 12% per year (Line 7). A Regulatory Assessment Fee Return must be completed, signed, and filed even if there are no revenues to report or if the minimum amount is due.

*When a company fails to timely file a Regulatory Assessment Fee Return, the Commission has the authority to order the company to pay a penalty and/or cancel the company's certificate. The company will have an opportunity to respond to any proposed Commission action.*

4. **EXTENSION:** A request for an extension of time up to 30 days may be made by filing the enclosed *Request for Extension to File Regulatory Assessment Fee Return* form (PSC/ADM-124), two weeks prior to the filing date. When an extension is granted, a charge shall be added to the amount due:

0.75% of the fee to be remitted for an extension of 15 days or less, *or*  
1.5% of the fee for an extension of 16 to 30 days.

In lieu of paying the charges outlined above, a company may file a return and remit payment based upon estimated gross operating revenues. If such return is filed by the normal due date, the company shall be granted a 30-day extension period in which to file and remit the actual fee due without paying the above charges, provided the estimated fee payment remitted is at least 90% of the actual fee due for the period. An automatic 30-day extension to file an actual return may be obtained by checking the "Estimated Return" space in the top left-hand corner on the reverse side.

5. **FEE ADJUSTMENTS:** You will be notified as to the amount and reason for any adjustment. Penalty and interest charges may be applicable to additional amounts owed the Commission by reason of the adjustment. The company may file a written request for a refund of any overpayments. The request should be directed to Fiscal Services at the below-referenced address.
6. **MAILING INSTRUCTIONS:** Please complete this form, make a copy for your records, and return the original in the enclosed preaddressed envelope. Use of this envelope should assure a more accurate and expeditious recording of your payment. **Make your check payable to the Florida Public Service Commission.** If you are unable to use the envelope, please address your remittance as follows:

Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850  ATTENTION: Fiscal Services
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7. **ADDITIONAL ASSISTANCE:** If you need additional information or assistance in preparing your Regulatory Assessment Fee Return or regarding telecommunications facilities, please contact the Division of Competitive Services at (850) 413-6600. This division may be contacted at the above-referenced address, directing correspondence to the attention of the division.

**Pay Telephone Service Provider Regulatory Assessment Fee Return**

**Florida Public Service Commission**

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

TE932-01-0-R  
 E. & H. Tel, Inc.  
 2651 South Course Drive, Suite 109  
 Pompano Beach, FL 33069-3963

PERIOD COVERED:  
 01/01/2001 TO 12/31/2001

FOR PSC USE ONLY	
Check#	_____
\$	_____ 0603002
	_____ 003001
\$	_____ P
	_____ 0603002
	_____ 004011
\$	_____ I
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)	\$ _____
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	( _____ )
4.	<b>TOTAL REVENUES for Regulatory Assessment Fee Calculation</b> (Line 2 less Line 3)	\$ _____
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)	_____
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____
8.	<b>TOTAL AMOUNT DUE</b>	\$ _____

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 \_\_\_\_\_

\* 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.

\_\_\_\_\_  
 (Signature of Company Official) (Title) (Date)

\_\_\_\_\_  
 (Preparer of Form - Please Print Name) Telephone Number ( ) Fax Number ( )

F.E.I. No. \_\_\_\_\_

**COMPANY IDENTIFICATION**

Printed on 01/11/2002 at 14:09:09 by PJI

Complete Name: E. & H. Tel, Inc.

Mailing Name: E. & H. Tel, Inc.

Company Code: TE932 FEID Number: 65-0377689

**RAF ACCOUNT FOR THE PERIOD 01/01/2000 THROUGH 12/31/2000**

Reg. Date:	11/24/1993	Inactive Date:	
Service:	PAT - Pay Telephone		
Received:	Actual RAF Form		
Status:	Satisfied		
Amended:	No	Extension:	No
Frozen:	No	Comments:	No
Payment Count:	1 Payment Made to Date		
Operating Rev:	\$2,705.95	Interstate Rev:	\$0.00
RAF Rate:	0.0015	Net RAF Due:	\$50.00

Assessment	Due	Paid	Owe
RAF	\$50.00	\$50.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
<b>Total</b>	<b>\$50.00</b>	<b>\$50.00</b>	<b>\$0.00</b>

Last modification was made on Monday, January 22, 2001 at 10:29 AM by Jackie Knight

Period covered:	01/01/2000 through 12/31/2000	RAF rate:	0.0015
Operating revenue:	\$2,705.95		
Documents:	Actual RAF form received on 01/12/2001		
	RAF form mailed on 12/05/2000		
Postmarked	Trans Date	Date Posted-By	Dep # Check # Check Amount
01/12/2001	01/19/2001	01/22/2001-JIK	GG006 1173 \$50.00
	RAF paid		GG006 \$50.00

**COMPANY IDENTIFICATION**

Printed on 01/11/2002 at 14:08:22 by PJI

Complete Name: E. & H. Tel, Inc.

Mailing Name: E. & H. Tel, Inc.

Company Code: TE932                      FEID Number: 65-0377689

**RAF ACCOUNT FOR THE PERIOD 01/01/2001 THROUGH 12/31/2001**

Reg. Date:	11/24/1993	Inactive Date:	
Service:	PAT - Pay Telephone		
Received:	No RAF Form		
Status:	Pending		
Amended:	No	Extension:	No
Frozen:	No	Comments:	No
Payment Count:	0 Payments Made to Date		
Operating Rev:	\$0.00	Interstate Rev:	\$0.00
RAF Rate:		Net RAF Due:	\$0.00

Assessment	Due	Paid	Owe
RAF	\$0.00	\$0.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

Last modification was made on Thursday, December 6, 2001 at 3:16 PM by Jackie Knight

Period covered: 01/01/2001 through 12/31/2001	RAF rate:
Operating revenue: \$0.00	
Documents: RAF form mailed on 12/06/2001	

Elaine Kessler  
E & H Tel., Inc.  
2651 South Course Dr.  
Suite 109  
Pompano Beach, FL 33069

2003 JUN 10 11:10:55  
DIVISION OF  
COMPETITIVE SERVICES

RECEIVED FPSC  
01 DEC 27 AM 10:35

COMMISSION  
CLERK

Filer 499 ID: 808836

Please be advised that the above named  
Corporation was voluntarily dissolved  
on March 15, 2001.

The dissolution was approved by the  
shareholders and the number of votes  
cast was sufficient.

No debt remains.

Sent

Elaine Kessler, Pres.  
ELAINE KESSLER

TE932

C: Paula Ister