

ORIGINAL

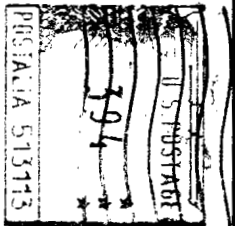
CERTIFIED MAIL

State of Florida Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



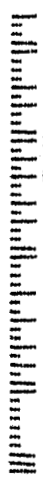
7000 0600 0026 4144 4925



All Kinds Cashed, Inc.
P. O. Box 297
Eaton Park FL 33840-0297

ALLK297 RETURN TO SENDER
338401013 1901 11 02/28/02
ALL KINDS CASHED BOX CLOSED
UNABLE TO FORWARD RETURN TO SENDER

338401013 1901 11 02/28/02



SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to: 011145

4a. Article Number

All Kinds Cashed, Inc.
P. O. Box 297
Eaton Park FL 33840-0297

I also wish to receive the following services (for an extra fee):

- Addressee's Address
 - Restricted Delivery
- Consult postmaster for fee.

- Certified
- Insured
- Merchandise
- COD

3ss (Only if requested)

Thank you for using Return Receipt Service.

0239 - P224

Is your RETURN ADDRESS completed on the reverse side?

6. Signature: (Addressee or Agent)
X

PS Form 3811, December 1994

Domestic Return Receipt

AUS
CAF
CMP
COM
CTR
EGR
GCL
OPC
MMS
SEC
OTH

DOCUMENT NUMBER DATE
02480 MAR-4 02
FPSC-COMMISSION CLERK