

ORIGINAL

CERTIFIED MAIL

State of Florida  
**Public Service Commission**

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850



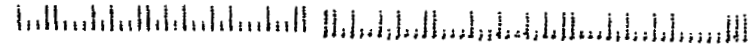
RETAINED TO SENDER  
**UNCLAIMED**

EasyComm Corporation  
P. O. Box 4363  
West Palm Beach FL 33402-4363

RETAINED TO SENDER  
**UNCLAIMED**

MAR 04  
3.9  
15 3.19

32399-0850



Is your RETURN ADDRESS indicated on the reverse side?

**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.

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

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

011143

4a. Article Number

EasyComm Corporation  
P. O. Box 4363  
West Palm Beach FL 33402-4363

- Certified
- Insured
- merchandise  COD

iss (Only if requested)

6. Signature: (Addressee or Agent)

X

Thank you for using Return Receipt Service.

02-0264

AUS	CAF	CMP	COM	CTR	ECR	GCL	OPC	MMS	SEC	OTH
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DOCUMENT NUMBER - DATE

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FPSC-001-11-5101 CLERK