

Interexchange Company Regulatory Assessment Fee Return

ORIGINAL

STATUS:
 Actual Return
 Estimated Return
 Amended Return

*P. Isler
JCEA*

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

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

D271 NOV 13 2002

TJ450-01-0-R
 Eureka Telecom, LLC
 270 Madison Avenue, 6th Floor
 New York, NY 10016-0601
 Docket # 020729-T1 (P. Isler)

FOR PSC USE ONLY
 Check# 369859
 \$ 50.00 0603001
 \$ 12.50 003001
 \$ 5.00 0603001
 004011
 Postmark Date 11/18/02 No Postmark
 Initials of Preparer mc

Please Complete Below If Official Mailing Address Has Changed

(Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE	
1.	Long Distance Services	\$ 0	\$ 0	AUS
2.	Access Services			CAF
3.	Private Line Services			CMP
4.	Leased Facilities & Circuits Services			COM
5.	Miscellaneous Services			CTR
6.	TOTAL Telephone Services	\$ 0	\$ 0	ECR
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)			GCL
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation			OPC
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)		50.00	MMS
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	12.50		SEC
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	5.00		OTH
12.	TOTAL AMOUNT DUE		\$ 67.50	

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

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

CURRENT COMPANY STATUS

() Facilities-Based Carrier (X) Reseller () Call Aggregator
 () Alternate-Operator Service () Rebillor () Other:

BILLING INFORMATION

Complete below if billing agent if other than yourself.
 (Name) (Address: City/State/Zip) (Telephone)
 What is the total amount of customer deposits collected? Amount: \$ 0 for 19
 What is the total amount of bond held (if applicable)? Amount: \$ N/A Expires:

COMPANY INFORMATION

Do you lease telecommunications facilities? (X) YES () NO
 If YES, who do you lease these facilities from? Name: Worldcom and Global Crossing
 Address:

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/her duty shall be guilty of a misdemeanor of the second degree.

(Signature of Company Official) *Norman H. Horton Jr* (Title) *Counsel* (Date) *11/13/02*
 (Preparer of Form - Please Print Name) *Norman H. Horton Jr* Telephone Number *850 222 0170* Fax Number *850 224 4357*

PSC/GMU-113 (Rev. 11/11/99) F.E.I. No. 12359 NOV 12 8
 FPSC-COMMISSION CLERK