Interexchange Company Regulatory Assessment Fee Return Florida Public Service Commission STATUS: (See Filing Instructions on Back of Form) 0603001 ✓ Actual Return TJ505-02-0-R 030000 - PU 003001 Estimated Return OCC, Inc. Amended Return 0603001 8829 Bond Street 004011 **4**8 66214 PERIOD COVERED: Postmark Date 01/01/2002 TO 12/31/2002 JAN 17 2003 Initials of Preparer Please Complete Below If Official Mailing Address Has Changed (Name of Company) (Address) (City/State) (Zip) FLORIDA LINE NO ACCOUNT CLASSIFICATION GROSS OPERATING REVENUE INTRASTATE REVENUE Long Distance Services 2. Access Services Private Line Services Leased Facilities & Circuits Services Miscellaneous Services 6 **TOTAL Telephone Services** LESS. Amounts Paid to Other Telecommunications Companies\* (see "2, Fees" on back) 8 TOTAL REVENUES For Regulatory Assessment Fee Calculation Regulatory Assessment Fee Due (Multiply Line 8 by 0 0015) Penalty for Late Payment (see "3 Failure to File by Due Date" on back) 10 Interest for Late Payment (see "3 Failure to File by Due Date" on back) BUF. 11 50.00 TOTAL AMOUNT DUE 12 These amounts must be intrastate only and must be verifiable. CMP COM AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50 CTR **CURRENT COMPANY STATUS** OPC ( ) Facilities-Based Carrier ( ) Reseller ( ) Call Aggregator MMS ( ) Alternate-Operator Service ( ) Rebiller ( > Other.\_\_ **BILLING INFORMATION** Complete below if billing agent if other than yourself. (Address City/State/Zip) (Telephone) What is the total amount of customer deposits collected? What is the total amount of bond held (if applicable)? Amount. \$\_ \_\_\_ for 19 Amount: \$ Expires COMPANY INFORMATION Do you lease telecommunications' facilities? ( ) YES If YES, who do you lease these facilities from? Name 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. horida 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 nu anicanor of the second degree IrnoTHY LOETHERN
(Preparer of Form - Please Print Name) PSC/CMU-153 (Rev. 11/11/99)

TO AVOID PLINALTY AND INTEREST CHARGES. THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2003



January 9, 2003

Florida Public Service Commission Attn: Fiscal Services 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

## Dear Sir or Madam:

The amount enclosed covers our activity in Florida from January 2002 through September 2002. In September, we ceased doing operations in Florida. We have enclosed a copy of a letter from one of our officers sent to your agency in October announcing this fact.

Before ceasing operations, QCC, Inc. was classified as a reseller and an operator service provider. If our company had not ceased operations this would be our classification for this report's purposes.

Please let us know if there is anything further needed in order to move further along with closing the tariffs and dockets in your state. If you have any questions or need anything further regarding this topic, please give me a call at 913-492-1230 ext. 5173.

Signed,

Timothy Loethen
Tax Accountant



COPY

October 11, 2002

The Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0866

Re: QCC, Inc., Co. code # TJ505

Dear Sir or Madam:

Please be advised that the above referenced company, QCC Inc., is in the process of withdrawing from doing business in the state of Florida. Please cancel any tariff and close the docket relating to this company.

If you have any questions, please contact me at 913-492-1230 ext. 5121.

Sincerely,

Allen Walbert Vice President-Tax