

ORIGINAL

030778-TC

CK05703697067

100.00

1. Name of company or name of individual (not fictitious name or d/b/a):

Feda' Hamdan

2. Name under which applicant will do business (fictitious name, etc.):

Feda' Hamdan

3. Official mailing address:

Street: 60 Citrus Ridge Court

P.O. Box: _____

City: Haines City

State: Florida

Zip: 33844

4. Florida address:

Street: "Same"

P.O. Box: _____

City: _____

State: _____

Zip: _____

5. Structure of organization:

Individual

Corporation

General Partnership

Limited Partnership

Other: _____

DEPOSIT DATE

D 374 AUG 08 2003

6. If incorporated in Florida, provide proof of authority to operate in Florida:

Florida Secretary of State

Corporate Registration Number: _____

AUS _____
NAF _____
CMP _____
COM _____
CTR _____
EUR _____
FCL _____
IPC _____
MS _____
OC _____
OTH _____

Form PSC/CMU-32 (02/99)

Required by Commission Rule Nos. 25-24.510 & 25-24.511

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