

REQUEST TO ESTABLISH DOCKET
(Please Type)

Date	August 12, 2003	Docket No.	030805-77
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1. Division Name/Staff Name:	Division of Competitive Markets & Enforcement/Isler
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2. OPR:	Division of Competitive Markets & Enforcement
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3. OCR:	Office of the General Counsel
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4. Suggested Docket Title:	Imposition of penalty by Florida Public Service Commission against IXC
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Registration No. TJ629, issued to Wholesale Carrier Services, Inc., for violation of Section 364.336, Florida Statutes.

5. Suggested Docket Mailing List (attach separate sheet if necessary)

A. Provide NAMES OR ACRONYMS ONLY if a regulated company.

B. Provide COMPLETE NAME AND ADDRESS for all others. (Match representatives to companies.)

1. Parties and their representatives (if any):

2. Interested persons and their representatives (if any):

6. Check one:

Documentation is attached.

Documentation will be provided with recommendation.

DOCUMENT NUMBER-DATE
07390 AUG 12 8
FPSC-COMMISSION CLERK

COMMISSIONERS:
LILA A. JABER, CHAIRMAN
J. TERRY DEASON
BRAULIO L. BAEZ
RUDOLPH "RUDY" BRADLEY
CHARLES M. DAVIDSON

STATE OF FLORIDA



412
DIVISION OF COMPETITIVE MARKETS &
ENFORCEMENT
WALTER D'HAESELEER
DIRECTOR
(850) 413-6600

Public Service Commission

April 28, 2003

Mr. Chris S. Barton, President
Wholesale Carrier Services, Inc. (TJ629)
7200 West Camino Real, Suite 303
Boca Raton, FL 33433-5511

Dear Mr. Barton:

The Regulatory Assessment Fee (RAF) is due by January 30th of each year for the preceding calendar year. For certificate holders, the RAF is owed even if a telecommunications company may not have started operations or had any revenues. If payment is made after the due date, then statutory penalty and interest charges are applicable.

Our records show that the 2002 RAF return notice was mailed on December 12, 2002, and a delinquent notice was mailed on February 20, 2003. As of this date, our records do not show receipt of the RAF return or payment. A copy of the 2002 RAF return form is enclosed.

If full payment, including penalty and interest charges, along with the RAF return form, are not received by May 19, 2003, a docket will be established. Your company will be fined or your certificate cancelled if you do not respond. Please note that once a docket has been established, **just paying the delinquent RAF amount will not prevent your certificate from being cancelled.**

If you wish to cancel your certificate voluntarily and leave in good standing with the Commission, your company should pay the past due amount in full, complete the 2002 RAF return form, either pay the 2003 RAF or provide a date certain it will be paid, and comply with the requirements of Rule 25-24.474, Florida Administrative Code, copy enclosed. Any unpaid RAFs, including penalty and interest charges, are turned over to the Florida Department of Financial Services for further collection efforts.

If you have any questions, please contact me at (850) 413-6502, by fax at (850) 413-6503, by e-mail at pisler@psc.state.fl.us, or by writing to me at the address below.

Sincerely,

A handwritten signature in cursive script that reads "Paula J. Isler".

Paula J. Isler, Research Assistant
Bureau of Service Quality

Enclosures

Interexchange Company Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
04/01/2002 TO 12/31/2002

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TJ629-02-0-R
Wholesale Carrier Services, Inc.
7200 West Camino Real, Suite 303
Boca Raton, FL 33433-5511

CC: P. Isler

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY

Check# _____
\$ _____ 0603001
003001
\$ _____ P
0603001
004011
\$ _____ I
Postmark Date _____
Initials of Preparer _____

(Name of Company)

(Address)

(City/State)

(Zip)

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

* 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
- Reseller
- Call Aggregator
- Alternate-Operator Service
- Rebiller
- 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: \$ _____ for 19_____
What is the total amount of bond held (if applicable)? Amount: \$ _____ Expires: _____

COMPANY INFORMATION

Do you lease telecommunications' facilities? YES NO
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, 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)

(Title)

(Date)

(Preparer of Form - Please Print Name)

Telephone Number () Fax Number ()

F.E.I. No. _____

25-24.474 Cancellation of a Certificate.

(1) The Commission may on its own motion cancel a company's certificate for any of the following reasons:

- (a) Violation of the terms and conditions under which the authority was originally granted;
- (b) Violation of Commission rule or order; or
- (c) Violation of Florida Statutes.

(2) If a certificated company desires to cancel its certificate, it shall request cancellation from the Commission in writing and shall provide the following with its request.

- (a) Statement of intent and date to pay Regulatory Assessment Fee.
- (b) Statement of why the certificate is proposed to be cancelled.
- (c) A statement on treatment of customer deposits and final bills.
- (d) Proof of individual customer notice regarding discontinuance of service.

(3) Cancellation of a certificate shall be ordered subject to the holder providing the information required by subsection (2).

Specific Authority 350.127(2) FS.
Law Implemented 350.113, 350.127(1), 364.285, 364.337, 364.345 FS.
History--New 2-23-87, Amended 3-13-96.

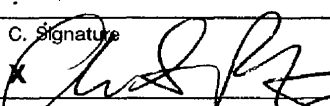
SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

 TJ629 Wholesale Carrier Services, Inc.
 7200 West Camino Real, Suite 303
 Boca Raton, FL 33433-5511

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
C. Signature 	
<input type="checkbox"/> Agent	<input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input type="checkbox"/> Yes	
If YES, enter delivery address below: <input checked="" type="checkbox"/> No	

... type

<input type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input checked="" type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

2. Article Number
 (Transfer from service label)

7002 0860 0001 1756 4861

MCD Company Information for TJ629

Printed on 08/11/2003 at 16:12:54 by PJI

Company Code: TJ629
Complete Name: Wholesale Carrier Services, Inc.
Mailing Name: Wholesale Carrier Services, Inc.
Certificate No(s): 8060
Status: Active
Regulation Date: 04/01/2002
Bankruptcy: No
Company Liaison #1: Chris S. Barton
Title: President
Mailing Address: 7200 West Camino Real, Suite 303

Physical Location: Boca Raton, FL 33433-5511
7200 West Camino Real, Suite 303

Phone: Boca Raton, FL 33433-5511
(561) 852-3400
Fax: (561) 750-7244

Related Dockets:
020044-TI Application for certificate to provide interexchange
telecommunications service by Wholesale Carrier Services, Inc.

COMPANY IDENTIFICATION

Printed on 04/18/2003 at 11:52:49 by PJI

Complete Name: Wholesale Carrier Services, Inc.

Mailing Name: Wholesale Carrier Services, Inc.

Company Code: TJ629 FEID Number: 65-0667666

RAF ACCOUNT FOR THE PERIOD 01/01/2002 THROUGH 12/31/2002

Reg. Date: 04/01/2002 Inactive Date:
 Service: IXC - Interexchange Telephone
 Received: No RAF Form
 Status: Pending
 Amended: No Extension: No
 Frozen: No Comments: No
 Payment Count: 0 Payments Made to Date
 Operating Rev: \$0.00 Interstate Rev: \$0.00
 RAF Rate: Net RAF Due: \$0.00

Assessment	Due	Paid	Owe
RAF	\$0.00	\$0.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Last modification was made on Thursday, December 5, 2002 at 9:56 AM by Jackie Knight

Period covered: 01/01/2002 through 12/31/2002 RAF rate:
 Operating rev: \$0.00 Interstate rev: \$0.00
 Documents: Delinquent letter mailed on 02/19/2003
 RAF form mailed on 12/05/2002