

ORIGINAL

M E M O R A N D U M

NOVEMBER 26, 2003

DOCKETED-FPSC

NOV 26 PM 3:36

COMMISSION
CLERK

TO: DIVISION OF THE COMMISSION CLERK AND ADMINISTRATIVE SERVICES

FROM: OFFICE OF THE GENERAL COUNSEL (ROJAS) *912*

RE: DOCKET NO. 030873-TX - APPLICATION FOR CERTIFICATE TO PROVIDE COMPETITIVE LOCAL EXCHANGE TELECOMMUNICATIONS SERVICE BY UTILITY USA, INC.

Attached are documents received from Mr. Oscar Nodarse to be placed in the above-referenced docket file.

JPR/js
Attachment

AUS _____
CAF _____
CMP _____
COM _____
CTR _____
ECR _____
GCL _____
OPC _____
MMS _____
SEC 1 _____
OTH _____

DOCUMENT NUMBER-DATE

12100 NOV 26 3

FPSC-COMMISSION CLERK

November 20, 2003

Mr.
Jason Rojas
Public Service Commission
Tallahassee, Fl


Ref: RAF penalty 2000,2001,2002 Telebeeper Inc.

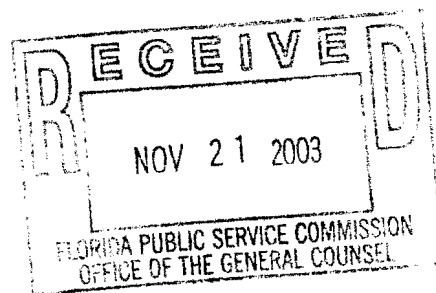
Dear Mr. Rojas:

Please find enclosed the RAF forms with the information that you requested, and check #1588 from Bank of America for the amount of \$592.50

We hope this will resolve the matter and expect to see you at your office in Tallahassee on 12/02/2003.

Sincerely yours:


Oscar Nodarse
Utility USA Inc
561-6424848



cc: Benny Motola

DOCUMENT NUMBER - DATE

12100 NOV 26 8

FPSC-COMMISSION CLERK

11/14/2003 14:27 850-413-8258

PSC LEGAL

PAGE 04

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

Competitive Local Exchange Company Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:

01/01/2002 TO 01/04/2002

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TX399-02-0-R
 Oscatel Communications
 10500 N.W. 50th Street, #102
 Sunrise, FL 33351-8090

FOR PSC USE ONLY

Check#

\$ _____ 060 006
 00 001
 \$ _____ P
 060 006
 00 011
 \$ _____ 1

Postmark Date _____

Initials of Preparer _____

Oscatel Communication 10500 N.W. 50th St #102 Sunrise FL 33351-8090
 (Name of Company) (Address) (City/State) (Zip)

Please Complete Below If Official Mailing Address Has Changed

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$ _____	\$ _____
2.	Long Distance Services (IntraLATA only)**	_____	_____
3.	Access Services	_____	_____
4.	Private Line Services	_____	_____
5.	Leased Facilities & Circuits Services	_____	_____
6.	Miscellaneous Services	_____	_____
7.	TOTAL REVENUES	_____	\$ 0
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	_____	_____
9.	Net IntraState Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)	_____	_____
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)	_____	\$ 50.00
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	\$ 12.50	_____
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	\$ 70.50	_____
13.	TOTAL AMOUNT DUE	_____	\$ 169.00

* These amounts must be intrastate only and must be verifiable.
 ** Other long distance revenues must be filed on the Interexchange Regulatory Assessment Fee Return.

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

CURRENT COMPANY STATUS

() Facilities-Based Provider

() Reseller

() Other: _____

BILLING INFORMATION

Complete below if billing agent is other than yourself

Mr. Oscar Nodarse 3814 Woods Walk Blvd LW FL 33467-5201 (642-2510)
 (Name) (Address: City/State/Zip) (Telephone)

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 337.36, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to defraud a public servant in the performance of his/her duty shall be guilty of a misdemeanor of the second degree.

MR. Tullio Rodriguez
 (Signature of Company Official)

(Title)

(Date)

(Preparer of Form - Please Print Name)

Telephone Number 954-389-3901

Fax Number _____

F.E.I. No. _____

11/14/2003 14:27 850-413-5250

PSC LEGAL

PAGE 03

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2002

Competitive Local Exchange Company Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

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

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

TX399-01-0-R
Oscatel Communications
10500 N.W. 50th Street, #102
Sunrise, FL 33351-8090

FOR PSC USE ONLY	
Check#	
\$	0605 306
	003 301
\$	P 0602 306
	004 311
\$	I
Postmark Date	
Initials of Preparer	

Please Complete Below if Official Mailing Address Has Changed

Oscatel Communication (Name of Company) 10500 N.W. 50th St # 102 (Address) Sunrise FL 33351-8090 (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$	\$
2.	Long Distance Services (total LATA only)**		
3.	Access Services		
4.	Private Line Services		
5.	Leased Facilities & Circuits Services		
6.	Miscellaneous Services		
7.	TOTAL REVENUES		510,847.00
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)		313,174.00
9.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		197,673.00
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)		296.50
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	\$12.50	
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	\$6.50	
13.	TOTAL AMOUNT DUE		315.50

- * These amounts must be itemized only and must be verifiable.
- ** Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.

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

CURRENT COMPANY STATUS

Facilities-Based Provider

Reseller

Other: _____

BILLING INFORMATION

Complete below if billable agent if other than yourself.

Mr. Oscar Nadarse (Name) 3814 Woods Walk Blvd L.W. FL 33467 (Address: City/State/Zip) (501) 642-2540 (Telephone)

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.

Mr. Tullio Rodriguez (Signature of Company Official) (Preparer of Form - Please Print Name)

954-389-3901 (Telephone Number) (Title) (Date)

11/14/2003 14:27 050-413-6250

PSC LEGAL

PAGE 02

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2001

Competitive Local Exchange Company Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
03/02/2000 TO 12/31/2000

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

TX399-00-0-R
Oscatel Communications
10500 N.W. 50th Street, #102
Sunrise, FL 33351-8090

FOR PSC USE ONLY		
Check#		
\$	0603	06
\$	003	01
\$	0603	06
\$	004	11
	1	
Postmark Date		
Initials of Preparer		

Please Complete Below If Official Mailing Address Has Changed

Oscatel Communication 10500 N.W. 50th ST #102 Sunrise, FL 33351-8090

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA	
		GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$	\$
2.	Long Distance Services (IntraLATA only)**		
3.	Access Services		
4.	Private Line Services		
5.	Leased Facilities & Circuits Services		
6.	Miscellaneous Services		
7.	TOTAL REVENUES		\$ 221,649.00
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)		- 102,600.00
9.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		119,049.00
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)		17.85735
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	\$ 12.50	
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	\$ 18.50	
13.	TOTAL AMOUNT DUE		\$ 210.00

- * These amounts must be intrastate only and must be verifiable.
- ** Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.

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

CURRENT COMPANY STATUS

() Facilities-Based Provider () Reseller
() Other: _____

BILLING INFORMATION

Complete below if billing agent if other than yourself.

Mr. Oscar Nodarse 3814 Woods Walk Blvd L.W. FL 33467 561 642-2540

COMPANY INFORMATION

Do you lease telecommunications facilities? () YES () NO

If YES, who do you lease these facilities from? Name: _____

Address: _____

I, the undersigned owner 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 or her duty shall be guilty of a misdemeanor of the second degree.

Mr. Tullio Rodriguez (Preparer of Form - Please Print Name) Telephone Number 954 389-3901 (Date) 11/2/03

Bank of America Advantage

OSCAR O. CARVAJAL
GLORIA P. CARVAJAL
1302 LAKE AVE.
LAKE WORTH, FL 33460-3606

DEPOSIT ONLY

1588

63-27/631 FL
20

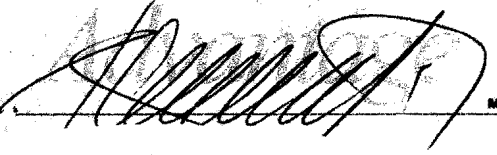
Date 11-20-03

Pay Public Service Comm. - \$ 592.⁵⁰
to the order of Five hundred ninety two 00/100 DOLLARS

Bank of America.



ACH R/T 063100277

Memo RAF for Telekeeper Inc. 

Security features
are included.
Circle on back.