-				STABLISH DOCKE ase Type)	Ť
Date	March 19, 2004			Docket No.	040256-10
1. Divisio	on Name/Staff Name:		Competitive Mar	kets & Enforceme	ent/HAWKINS
2. OPR:	HAWKINS (355)	H	· ·····		
3. OCR:		·			
4. Sugge	ested Docket Title:	Requ	est for cancellatio	n of PATS Certific	ate No. 7475 by Leonel Mungia,
effective (3/2/04.				
	-				
5. Sugge	sted Docket Mailing	List (a	ttach separate sh	eet if necessary)	
A. Pi	rovide NAMES OR AC	RONYM	IS ONLY if a regula	ted company.	
B. Pi	rovide COMPLETE NA	ME AN	D ADDRESS for all	others. (Match re	epresentatives to companies.)
1.	Parties and the	eir repi	resentatives (if any	y):	
	·····		<u></u>		
<u></u>					· · · · · · · · · · · · · · · · · · ·
<u>.</u>					
<u>, .</u>					
2.	Interested per	sons ai	nd their represent	atives (if any):	
			-	- <u>1</u>	
<u> </u>					
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6. Check			entation is attache		
	······				
	L.	ocume	entation will be pro	ovided with recom	imendation.
PSC\CCA0	10-C (Rev 02/02)				
					DOCUMENT NUMPER-DA
				X	03842 MAR 23

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FPSC-COMMISSION CLERK-

BHH 3/11/04

COMPANY NAME: Leonel MungiaCO. CODE: TG705
COMPANY LIAISON:Same, Owner
DOCKET NO.: CERTIFICATE NO.:_7475 EFFECTIVE:_07/05/00
RAF RETURN NOTICE:
DELINQUENT NOTICE:
OTHER RETURNED MAIL:
CCA'S RETURNED MAIL:
YEAR(s) RAFS NOT PAID: 2004
YEAR(s) PENALTIES & INTEREST NOT PAID:
Amount Year Paid REVENUES/YEAR:
DATE LOTUS CHECKED FOR PAYMENT:
OTHER INFORMATION
03/02/04 - From company - Payment of the 2003 RAF, along with letter
requesting cancellation of certificate.
03/05/04 - Wrote company and advised company to pay the 2004 RAF.
Follow up 03/31/04
3/17/04- Hom Co Daym. of 2004 RAF.
- Inwarded file to JG gar handling.
Vol. cancellation, Ey. 3/2/04

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Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS	S:	Florida Public Service		FOR PSC USE ONLY Check#
	Actual Return Estimated Return Amended Return R 17 COVERED: 2004:TO 12/31/2004	TG705-04-0-R Leonel Mungia 744:South Bluford Avenue Ocoee, FL 34761-2941 ERVICES CC: P. Jeler	0443 MAR 17	\$0603002 003001 \$P 0603002 004011 25041 Postmark Date?-13-04/ Initials of PreparerR_T
Mi	Ranchito	Mat Ma (Ket	Mailing Address Has Changed	
	(Name of Company)	(Ac	ldress)	(City/State) (Zip)
LINE <u>NO.</u>	4	ACCOUNT CLASSIFICATIO	N	AMOUNT
1.	Gross Operating Rev	venue (Florida)		s
2.	Gross Intrastate Reve	enue		<u> </u>
3.	LESS: Amounts Pai (see "2. Fees" on bac	d to Other Telecommunication k)	s Companies*	()
4.	TOTAL REVENUE (Line 2 less Line 3)	ES for Regulatory Assessmen	t Fee Calculation	s
5.	Regulatory Assessme	ent Fee Due – (Multiply Line 4	4 by 0.0015)	
6.	Penalty for Late Payr	nent (see "3. Failure to File by	Due Date" on back)	
7.	Interest for Late Payr	ment (see "3. Failure to File by	Due Date" on back)	101
8.	TOTAL AMOUNT	DUE	CF	[050s 170+
		D IN SECTION 364.336 FLORIDA ST COMPLETED AND RETURNED REC		しんが、「「「「」」」、「」」、「」」、「」」、「」」、「」、「」、「」、「」、「」、
9.	Number of pay telep by this Return	hones in operation at close of I	period covered	<u> </u>
• These am	ounts must be <u>intrastate only</u> and mu	st be verifiable.		
I, the un	ndersigned owner/officer of the a	bove-named company, have read the foregoi pursuant to Section 837.06, Florida Statutes,	ng and declare that to the best of my know	ledge and belief the above information is a

public servant in the performance of his official duty shall be guilty of a misdemeand	or of the second degree.
Agard MMM	3-19-04
LONE (Signature of Company Official) MUNGUTA	(Title) Telephone Humber (4976544470 Fax Number (4076549411
(Preparer of Form - Please Print Name)	F.E.L. No. 59 344 6663

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

STATE OF FLORIDA

DIVISION OF COMPETITIVE MARKETS & ENFORCEMENT BETH W. SALAK DIRECTOR (850) 413-6600

Hublic Serbice Commission

March 5, 2004

Mr. Leonel Mungia (TG705) 744 South Bluford Avenue Ocoee, FL 34761-2941

Dear Mr. Mungia:

On March 2, 2004, the Commission received your 2003 Regulatory Assessment Fee return form, along with payment and a letter requesting cancellation of your certificate. I researched our records but could not find record that you had previously requested cancellation of your certificate from this Commission. A copy of the cancellation rule is enclosed.

The Regulatory Assessment Fee is assessed if a certificate is active for any one day during a calendar year, even if a company had no revenues or ever started operations during the period covered. This means that since you did not request cancellation of your certificate in 2003, the 2004 Regulatory Assessment Fee is owed. The 2004 Regulatory Assessment Fee return form is enclosed.

Please complete the 2004 Regulatory Assessment Fee return form and include payment of the \$50 minimum. As soon as payment is received, a docket will be established to recommend a voluntary cancellation of your pay telephone certificate. When returning payment and the completed 2004 Regulatory Assessment Fee return form, please use the enclosed blue envelope, which will insure prompt processing.

In the meantime, if you have any questions, just let me know. I can be reached at (850) 413-6502-phone, (850) 413-6503-fax, by internet e-mail at PIsler@psc.state.fl.us, or at the address at the bottom of Page One.

Sincerely,

Aquía J. Isla

Paula J. Isler, Research Assistant Bureau of Service Quality

Enclosures TMS #1122

Internet E-mail: contact@psc.state.fl.us

25-24.514 Cancellation of a Certificate.

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(1) The Commission may 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 rules or orders;

(c) Violation of Florida Statutes; or,

(d) Failure to provide service for a period of six (6) months.

(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.

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

Specific Authority: 350.127(2), F. S. Law Implemented: 350.113, 350.127(1), 364.03, 364.285, 364.337, 364.345, F.S. History: New 1/5/87.

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тì	AVOID RENAUTY AND INTEREST CHARGES.	THE REGULATORY ASSESSMENT	T FEE RETURN MUST BE FILED ON OR BEFORE 01/31/200	25
	SAVOID FERALLI AND INTEREST CHIROLS.	THE RECORDING TOOL TOOL TOOL	The reproduction of the one of th	~

Pay Telephone Service Provider Regulatory Assessment Fee Return

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STATUS:	Florida Public Service Commission (See Filing Instructions on Back of Form)	FOR PSC USE ONLY Check#
Actual Return Estimated Return Amended Return	TG705-04-0-R Leonel Mungia 744 South Bluford Avenue Ocoee, FL 34761-2941	\$0603002 003001 \$P 0603002 004011 \$I
PERIOD COVERED: 01/01/2004 TO 12/31/2004	cc: P. Isler	Postmark Date Initials of Preparer

Please Complete Below If Official Mailing Address Has Changed

	(Name of Company)	(Address)	(City/State)	(Zip)
LINE <u>NO.</u>	ACCOUNT	CLASSIFICATION	AMO	UNT
1.	Gross Operating Revenue (Florida	ı)	\$	•
2.	Gross Intrastate Revenue			
3.	LESS: Amounts Paid to Other Te (see "2. Fees" on back)	lecommunications Companies*	()
4.	TOTAL REVENUES for Regula (Line 2 less Line 3)	atory Assessment Fee Calculation	\$	
5.	Regulatory Assessment Fee Due -	- (Multiply Line 4 by 0.0015)		
6.	Penalty for Late Payment (see "3.	Failure to File by Due Date" on back)		<u></u>
7.	Interest for Late Payment (see "3.	Failure to File by Due Date" on back)		
8.	TOTAL AMOUNT DUE		\$	
		64.336 FLORIDA STATUTES, THE MINIMUM AI		RTED

9.	Number of pay telephones in operation at close of period covered
	by this Return

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

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 official 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 ())
(rreparer of rorm - rrease rrint trame)	F.E.I. No	

.

Paula Isler

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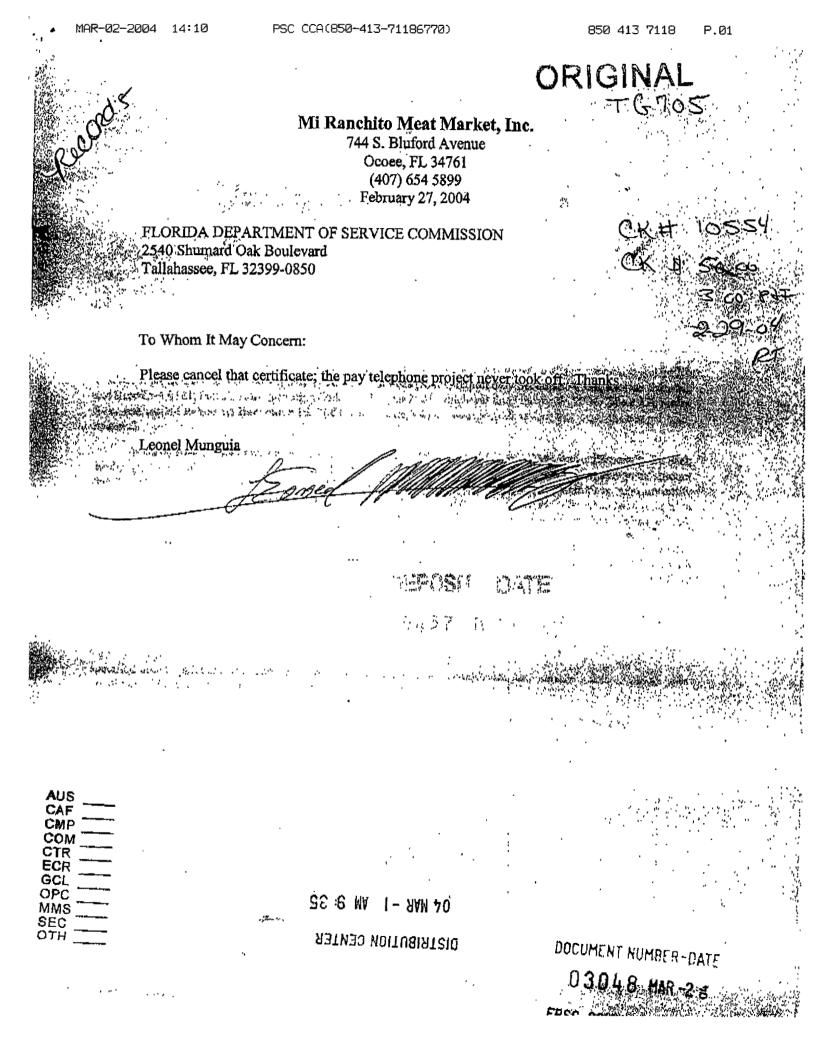
From:Paula IslerSent:Tuesday, March 02, 2004 1:49 PMTo:Ruth NettlesSubject:RE: TG705/Mi Ranchito Meat Market

Hi Ruth. No do not cancel. They paid 2003 RAF and P&I for 2003. They also owe 2004. Fax to me and I'll contact them. Thanks.

-----Original Message-----From: Ruth Nettles Sent: Tuesday, March 02, 2004 1:26 PM To: Paula Isler Subject: TG705/Mi Ranchito Meat Market

Good afternoon, again. I have another request for cancellation of PATS certificate from Mi Ranchito, they have submitted \$53 payment. Can you provide the information of what is being paid? the year for the RAF would be very helpful, and what year interest are they paying?

Thank you, Paula.



Ruth Nettles **********

Official Filing

3/2/2004 1:59 PM

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Ruth Nettles

To: Paula Isler Subject: RE: TG705/Mi Ranchito Meat Market

Okay, thank you. I'll fax right now.

-----Original Message-----From: Paula Isler Sent: Tuesday, March 02, 2004 1:49 PM To: Ruth Nettles Subject: RE: TG705/Mi Ranchito Meat Market

Hi Ruth. No do not cancel. They paid 2003 RAF and P&I for 2003. They also owe 2004. Fax to me and I'll contact them. Thanks.

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Good afternoon, again. I have another request for cancellation of PATS certificate from Mi Ranchito, they have submitted \$53 payment. Can you provide the information of what is being paid? the year for the RAF would be very helpful, and what year interest are they paying?

Thank you, Paula.

MCD Company Information for TG705

Printed on 03/05/2004 at 11:06:03 by PJI

Company Code: Complete Name: Mailing Name: Certificate No(s): Status: Regulation Date: Bankruptcy: Company Liaison #1: Title: Mailing Address:

TG705 Leonel Mungia Leonel Mungia 7475 Active 07/05/2000 No Leonal Munguia Owner/President 744 South Bluford Avenue

Ocoee, FL 34761-2941 744 South Bluford Avenue

Physical Location:

Phone: Fax:

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Ocoee, FL 34761-2941 (407) 654-5899 (407) 654-9616

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Related Dockets:

000408-TC

Application for certificate to provide pay telephone service by Leonel Mungia.

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