

040000

Pay Telephone Service Provider Regulatory Assessment Fee Return

ORIGINAL

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

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2004 TO 12/31/2004

TE421-04-0-R
Mr. Edul B. Malesra
1 Cerrudo Lane
Palm Coast, FL 32137-8140

DEPOSIT DATE
5 1 4 DEC 2 8 2004

FOR PSC USE ONLY

Check# 1287

\$ 50.00 06-03-001
003001

\$ _____ P 06-03-001
004011

\$ _____ I

Postmark Date 12-20-04
Initials of Preparer RT

Records

(Name of Company)

(Address)

(City/State)

(Zip)

LINE

LINE NO.	ACCOUNT CLASSIFICATION	CMP	AMOUNT
1.	Gross Operating Revenue (Florida)	COM	\$ <u>0</u>
2.	Gross Intrastate Revenue	CTR	<u>0</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	ECR	<u>()</u>
4.	TOTA (Line 2) <u>Dec 20, 04</u>	OPC	\$ <u>0</u>
5.	Regula <u>FPSC</u>	MMS	<u>0</u>
6.	Penalty <u>Tall, FL 32399</u>	RCA	<u>0</u>
7.	Interes	SCR	<u>0</u>
8.	TOTA	SEC <u>1</u>	<u>0</u>
		OTH	\$ <u>50.00</u>

MINIMUM ANNUAL FEE IS \$50
AMOUNT OF REVENUES REPORTED

0

certificate in Pay Phone Business

of my knowledge and belief the above information is a true an
statement in writing with the intent to mislead a public servant in th

20, 04 Owner/Op.
(Title) (Date)

4159132 Fax Number ()

* These amounts must be

I, the undersigned
correct statement. I am
performance of his off

(Prepare

MR. Edul B. MALESRA

DOCUMENT NUMBER-DATE

13493 DEC 27 04

FPSC-COMMISSION CLERK