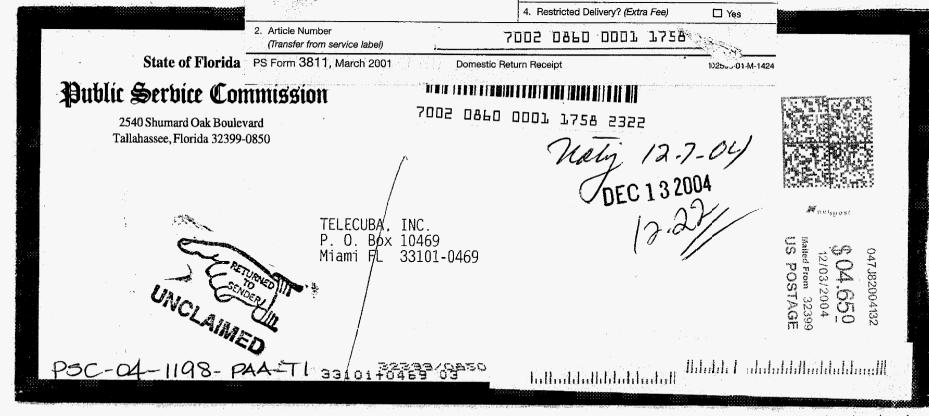
DOCUMENT NUMBER-DATE

る上つ	AM 9: 04	SSION	85-17
	1 N S0	COMMISSION	OYOGAS

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	\$1000000000
© Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Received by (Please Print Clearly) B. Dale	e of Delivery
Print your name and address on the reverse so that we can return the card to you.	C. Signature	
 Attach this card to the back of the mailpiece, or on the front if space permits. 	1 - X	Agent Addressee
1. Article Addressed to: 040925 TELECUBA, INC.	,] Yes
P. 0. Box 10469 Miami FL 33101-0469	3. Service Type	/lerchandis
* 1.38************************************	4. Restricted Delivery? (Extra Fee)] Yes



COM CTR ECR GCL OPC MMS RCA SCR SCR SCR