

Pay Telephone Service Provider Regulatory Assessment Fee Return

ORIGINAL

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

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
03/09/2004 TO 12/31/2004

TG985-04-0-R *Dep 569 Jul 7, 2005*
 Durty Harry's Raw Bar & Saloon
 1368 S.E. 17th Street
 Ft. Lauderdale, FL 33316-1708
 (Request for cancellation-Isler)

FOR PSC USE ONLY

Check# 3684

\$ 50.00 06-03-001
003001

\$ 5.00 P 06-03-001
004011

\$ 1.00 I

Postmark Date 6-29-05

Initials of Preparer RT

Please Complete Below If Official Mailing Address Has Changed

(Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	CMP	COM	CTR	ECR	GCL	OPC	MMS	RCA	SCR	SEC	OTH	AMOUNT
1.	Gross Operating Revenue (Florida)												
2.	Gross Intrastate Revenue												
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)												
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)												\$ <u>0</u>
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)												\$ <u>50.00</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)												\$ <u>5.00</u>
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)												\$ <u>1.00</u>
8.	TOTAL AMOUNT DUE												\$ <u>56.00</u>

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

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return 8

* 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]
(Signature of Company Official)
Jetty Cary
(Preparer of Form - Please Print Name)

V.P. (Title) 6/25/05 (Date)
 Telephone Number 854 961-4757 Fax Number ()
 F.E.I. No. 65-0301536

DOCUMENT NUMBER-DAT
06354 JUL-7 05