

ORIGINAL

RECEIVED-FPSC

05 NOV 29 AM 11:00

COMMISSION  
CLERK

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

050622

Florida Phone Service, Inc.  
Mr. Orlando Barrios  
7181 S.W. 117th Avenue  
Miami FL 33183-2807

PAA

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

X [Signature] 11-23-05

C. Signature  Agent  
X Lobsang Burgos  Addressee

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number

(Transfer from service label)

7004 1160 0004 5750 7308

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

- CMP \_\_\_\_\_
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR \_\_\_\_\_
- GCL \_\_\_\_\_
- OPC \_\_\_\_\_
- RCA \_\_\_\_\_
- SCR \_\_\_\_\_
- SGA \_\_\_\_\_
- SEC 1
- OTH \_\_\_\_\_

PSC-05-1157-PAA-TX

DOCUMENT NUMBER-DATE

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