

REQUEST TO ESTABLISH DOCKET
(Please Type)

Date: 12/5/2005 Docket No.: 050904-77

1. Division Name/Staff Name: Division Of Competitive Markets & Enforcement/Isler

2. OPR: Division Of The Commission Clerk And Administrative Services

3. OCR: Office Of The General Counsel

4. Suggested Docket Title: Acknowledgment of cancellation of IXC Registration No. TJ792 by Telmi, Inc., effective March 14, 2005.

5. Suggested Docket Mailing List (attach separate sheet if necessary)

A. Provide NAMES OR ACRONYMS ONLY if a regulated company.

B. Provide COMPLETE NAME AND ADDRESS for all others. (Match representatives to companies.)

1. Parties and their representatives (if any):

2. Interested persons and their representatives (if any):

6. Check one:

Documentation is attached.

Documentation will be provided with recommendation.

DOCUMENT NUMBER-DATE
11436 DEC-5 '05
PSC/CCLERK

12/05/2005

Fiscal Service Check Reconciliation System

Company Code: TJ792

Company Name: Telmi, Inc.

Check date range: All dates

Check value range: All amounts

Check Date	Entered	Audited	Notes	Check No.	Amount
02/26/2004	03/02/2004	03/03/2004	<none>	1012	55.00
03/10/2005	03/14/2005	03/17/2005	<none>	1015	106.00

Number of checks in Batch: 2

Batch Total Sum: \$161.00

Interexchange Company Regulatory Assessment Fee Return *7871 106.00*

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2005 TO 12/31/2005

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

TJ792-05-0-R
Telmi, Inc.
1 S.E. 3rd Avenue, #1450
Miami, FL 33131-1714
5 4 6 MAR 2 2005

FOR PSC USE ONLY
Check# *1015*
\$ *50.00* 06-03-001
003001
\$ _____ P
06-03-001
004011
\$ _____ J
Postmark Date *3-14-05*
Initials of Preparer *RT*

Please Complete Below If Official Mailing Address Has Changed

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

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Long Distance Services	\$ <i>-0-</i>	\$ <i>-0-</i>
2.	Access Services	_____	_____
3.	Private Line Services	_____	_____
4.	Leased Facilities & Circuits Services	_____	_____
5.	Miscellaneous Services	_____	_____
6.	TOTAL Telephone Services	\$ <i>-0-</i>	\$ <i>-0-</i>
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(_____)	(_____)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation	_____	_____
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)	_____	_____
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
12.	TOTAL AMOUNT DUE	_____	\$ <i>50.00</i>

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

Company has been terminated.

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

CURRENT COMPANY STATUS

- Facilities-Based Carrier
- Reseller
- Call Aggregator
- Alternate-Operator Service
- Rebiller
- Other: *INACTIVE*

BILLING INFORMATION

Complete below if billing agent if other than yourself.

(Name) (Address: City/State/Zip) (Telephone)
What is the total amount of customer deposits collected? Amount: \$ _____ for 19 _____
What is the total amount of bond held (if applicable)? Amount: \$ _____ Expires: _____

COMPANY INFORMATION

Do you lease telecommunications' facilities? YES NO
If YES, who do you lease these facilities from? Name: _____
Address: _____

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/her duty shall be guilty of a misdemeanor of the second degree.

(Signature of Company Official) *[Signature]* (Title) *N/A* (Date) *3/10/05*
(Preparer of Form - Please Print Name) *ALLAN ROY MESHAW* Telephone Number (561) 843 8112 Fax Number (561) 892 6271
F.E.I. No. *01-0629699*

MCD Company Information for TJ792

Printed on 12/05/2005 at 11:25:22 by PJI

Company Code:	TJ792
Complete Name:	Telmi, Inc.
Mailing Name:	Telmi, Inc.
Certificate No(s):	
Status:	Active
Regulation Date:	05/23/2003
Bankruptcy:	No
Company Liaison #1:	Marcos Korn
Title:	President
Mailing Address:	1 S.E. 3rd Avenue, #1450
	Miami, FL 33131-1714
Physical Location:	1 S.E. 3rd Avenue, #1450
	Miami, FL 33131-1714
Phone:	(305) 532-5516
Fax:	(305) 402-5940
Related Dockets:	
030451-TI	Acknowledgment of registration as intrastate interexchange telecommunications company effective 5/23/03, by Telmi, Inc.