

PSC-05-1258-PAA-TI

00426 JAN 17 8
DOCUMENT NUMBER-DATE

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		<p>A. Received by (Please Print Clearly) _____ B. Date of Delivery _____</p> <p>C. Signature _____ <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
1. Article Addressed to: PSC-05-1258 050709 DSL Telecom, Inc. 7775 S.W. 87th Avenue, #110 Miami FL 33176-2536 PAA		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label) PS Form 3811, March 2001		7004 1160 0004 5751 0278 Domestic Return Receipt 102595-01-M-1424	

047J82004132
 \$04.880
 12/27/2005
 Mailed From 32399
 US POSTAGE

State of Florida
Public Service Commission
 2540 Shumard Oak Boulevard
 Tallahassee, Florida 32399-0850

ORIGINAL

RECEIVED
JAN 17 2006

FPSC-COMMISSION CLERK

RETURNED TO SENDER
 ADDRESSEE UNKNOWN

DSL Telecom, Inc.
 7775 S.W. 87th Avenue, #110
 Miami FL 33176-2536

UNC
7342

CMP | COM | CTR | ECR | GCL | OPC | RCA | SCR | SGA | SEC | OTH