

ORIGINAL

RECEIVED-FPSC

06 FEB -8 PM 1:42

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:

050719

Texcom U.S.A.
701 Brickell Avenue, Suite 1350
Miami FL 33131-2800

PSC-06-0051-0-TI

COMPLETE THIS SECTION ON DELIVERY

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

C. Signature

X

- Agent
- 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

7004 1160 0004 5751 1411

(Transfer from service to)

Domestic Return Receipt

102595-01-M-1424

State of Florida

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7004 1160 0004 5751 1411

RETURN TO SENDER

ATTEMPTED NOT KNOWN

Texcom U.S.A.
701 Brickell Avenue, Suite 1350
Miami FL 33131-2800

Handwritten signature and date: JNK 2/3/09

047J82004132

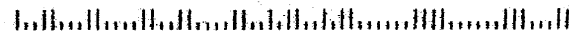
\$04.640

01/20/2006

Mailed From 32399

US POSTAGE

33131+2



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

DOCUMENT NUMBER-DATE

01119 FEB-8 8

FPSC-COMMISSION CLERK