

060221-71

Interexchange Company Regulatory Assessment Fee Return

ORIGINAL

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

STATUS:

- Actual Return
- Estimated Return
- Amended Return

FIELD(1) TJ 815-04-0-R

FastCall Telecom, Inc.
 295 Nesbit Entry Drive
 Roswell, GA 30076
 Tel: (866) 650-FAST (3278)

DEPOSIT

636 MAR -3, 2006

FOR PSC USE ONLY

Check # 1154

\$ 50.00 0603001
003001

\$ 5.00 P 0603001
004011

\$ 1.00 I

Postmark Date 3-6-06

Initials of Preparer DMARIB AM

PERIOD COVERED:
FIELD(3)

Records + Paula

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	\$ <u>0</u>	\$ <u>0</u>
2.	Access Services	_____	_____
3.	Private Line Services	_____	_____
4.	Leased Facilities & Circuits Services	_____	_____
5.	Miscellaneous Services	_____	_____
6.	TOTAL Telephone Services	\$ <u>0</u>	\$ <u>0</u>
7.	LESS: Amounts Paid to Telecommunications Companies ⁽¹⁾	(_____)	(_____)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation	\$ <u>0</u>	\$ <u>0</u>
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0020)	_____	<u>50.00</u>
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____	<u>5.00</u>
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____	<u>1.00</u>
12.	Extension Payment Fee (see "4. Extension" on back)	_____	_____
13.	TOTAL AMOUNT DUE (\$50 MINIMUM)	_____	\$ <u>56.00</u> ⁽²⁾

- (1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).
- (2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

CURRENT COMPANY STATUS

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

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: \$ 0 for 20 05 / 06

What is the total amount of bond held (if applicable)?
 Amount: \$ 0 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) (Title) 3/6/06 (Date)

DAVID SPARUS
 (Preparer of Form - Please Print Name)

Telephone Number (770) 309-0099 Fax Number _____

F.E.I. No. 70-0019116

RECEIVED - PSC
 03 MAR 13 AM 11:09
 COMMISSIONER
 CLERK
 DOCUMENT NUMBER
 0217 MAR 13 06
 FPSC-COMMISSION CLERK

FASTCALL TELECOM, INC.

1154

Check Number: 1154

Check Date: Dec 30, 2005

Vendor: Florida Public Service Comm.

Check Amount: \$56.00

Item to be Paid - Description

Discount Taken

Amount Paid

Regulatory Assessment Fee

56.00

*Business Closed.
-please cancel company registration.*