

ORIGINAL

RECEIVED-FPSC

06 JUL 31 PM 3:21

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: 060466

Telepacket, Inc.
10 Corporate Park, Suite 205
Irvine CA 92606-5199

PSC-06 0615 PAA-TI

2. Article Number
(Transfer from service label)

7004 1160 0004 5750 9975

State of Florida

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7004 1160 0004 5750 9975

Telepacket, Inc.
10 Corporate Park, Suite 205
Irvine CA 92606-5199

RETURN
TO SENDER
FWDG ORDER EXPIRED

COMPLETE THIS SECTION ON DELIVERY

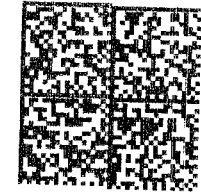
A. Signature Agent
X Addressee

B. Received by (Printed Name) C. Date of Delivery

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



uspost

Mailed From 32399
US POSTAGE

07/20/2006

\$04.640

047J82004132

UTF

CMP
COM
CTR
ECR
GCL
OPC
RCA
SCR
SGA
SEC
OTH

DOCUMENT NUMBER - DATE

06840 JUL 31 8

FPSC-COMMISSION CLERK