

ORIGINAL

060466

RECEIVED-FPSC

06 AUG -1 PM 3:57

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**

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

Latin American Enterprises, Inc.
2929 S.W. 3rd Avenue, Suite 320
Miami FL 33129-2710

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 5750 9487**
(Transfer from service label)

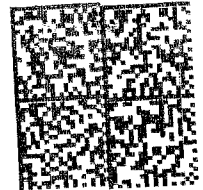
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

State of Florida
Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7004 1160 0004 5750 9487



FORWARDING ORDER EXPIRED
RETURN TO SENDER

Latin American Enterprises, Inc.
2929 S.W. 3rd Avenue, Suite 320
Miami FL 33129-2710

FOT 2907

uspost
047J82004132
\$04.640
07/20/2006
Mailed From 32399
US POSTAGE

DOCUMENT NUMBER-DATE

06880 AUG-1 '98

FPSC-COMMISSION CLERK

CMP
COM
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