

ORIGINAL

RECEIVED-FPSC

06 AUG -8 AM 11:03

COMMISSION CLERK

060465-TC

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: 060465

Habib Fayiz  
1434 Ocean Reef Road  
Wesley Chapel, FL 33543-6689

2. Article Number

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  No  
If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

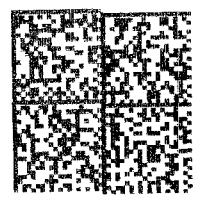
State of Florida

Public Service Commission

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850



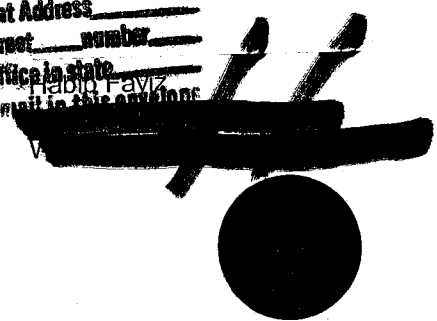
7004 1160 0004 5751 4085



usps

047J82004132  
\$04.640  
07/20/2006  
Mailed From 323399  
US POSTAGE

- Delivered  by check
- Delivered  Refused
- Attempted Not known
- Insufficient Address
- No such street number
- No such office in state
- Not returned to sender



1st NOTIC 7-28  
2nd NOTIC 7-29  
RETURNED 8-4

CMP COM CTR ECR GCR OPC RCA SCR SGA SEC OTH

DOCUMENT NUMBER - DATE

07089 AUG -8 8

FPSC-COMMISSION CLERK