

RECEIVED 1:50

05 AUG 17 PM 2:13

COMMISSIONER
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: 060465

Royal Tech Communications, Inc.
7645 Black Olive Way
Tamarac, FL 33321-2713

COMPLETE THIS SECTION ON DELIVERY

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

C. Signature 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

PSC-06-0614-PAR-TC

2. Article Number

~~(Transfer from service label)~~ 7004 1160 0004 5751 3811

State of Florida

PS Form 3811, March 2001

Domestic Return Receipt

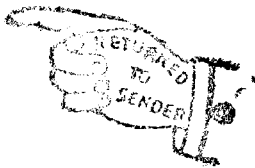
102595-01-M-1424

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7004 1160 0004 5751 3811



UNCLAIMED

Royal Tech Communications, Inc.
7645 Black Olive Way
Tamarac, FL 33321-2713

NAME _____
1st Notice 7-24
2nd Notice _____
Return _____

AUG 08 2006



047382004132
\$04.640
07/20/2006
MAIL FROM 32399
US POSTAGE

CMP
COM
CTR
ECR
GCI
OPC
RCA
SCR
SCA
SEC
OTH

DOCUMENT NUMBER - DATE

07406 AUG 17 08

FDCC - COMMUNICATIONS

ORIGINAL