

ORIGINAL

RECEIVED  
06 AUG 23 PM 3:23  
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: 060462

Amigos Telephonica  
803 South Federal Highway  
Dania, FL 33004-4336

**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

PSC-06-0611-PAA-TX

2. Article Number (Transfer from service label) 7004 1160 0004 5751 2715

State of Florida  
**Public Service Commission**  
2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

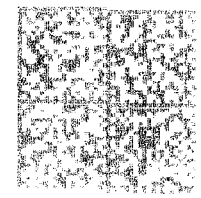
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



7004 1160 0004 5751 2715



Amigos Telephonica  
803 South Federal Highway  
Dania, FL 33004-4336

F

801

2/7-28

PAID \$0.00

AMIG001 330042222 1306 08 07/27/06  
 NOTIFY SENDER OF NEW ADDRESS  
 AMIGOS TELEPHONICA  
 803 SOUTH FEDERAL HIGHWAY  
 DANIA, FL 33004



NAME \_\_\_\_\_  
 1st Notice JUL 28  
 2nd Notice 8-08  
 Return 8-17

CMP  
 COM  
 CTR  
 ECR  
 GCL  
 OPC  
 PCA  
 SCR  
 SOA  
 SSO  
 OTH kim

DOCUMENT NUMBER - DATE  
07703 AUG 23 98  
 FPSC-COMMISSION CLERK