

RECEIVED FPSC

07 JAN 31 AM 11:10

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: *0600*  
~~Telephone One Inc.~~  
~~Oswaldo Fernandez~~  
~~9523 S.W. 18th Terrace~~  
~~Coral Gables FL 33165-7621~~

*PSC-07-0011 70-TX*  
 (Transfer from service label) 7004 1160 0004 5751 3477

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
**X**  Agent  
 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.  
 Restricted Delivery? (Extra Fee)  Yes

DOCUMENT NUMBER - DATE

01023 JAN 31 10

FPSC-COMMISSION CLERK

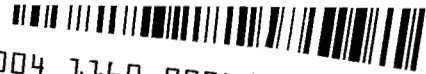
State of Florida  
**Public Service Co**

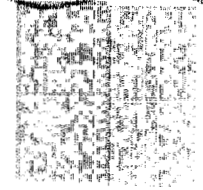
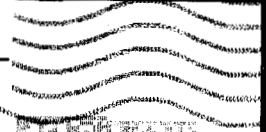
2540 Shumard Oak Boulevard  
 Tallahassee, Florida 32399-0850

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7004 1160 0004 5751 3477  




*No*

~~Telephone One Inc.~~  
~~Oswaldo Fernandez~~  
~~9523 S.W. 18th Terrace~~  
~~Coral Gables FL 33165-7621~~

JAN 8 2007

*22*  
**RECEIVED**

3811  
 7004 1160 0004 5751 3477  
 \$04.640

CMP  
 COM  
 CTR  
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 GCL  
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ORIGINAL