

Records
Paula

TX727-07

CK# 6342

Total \$100.00

\$ 50.00

070118-TP

ORIGINAL

2-15-07
R



PHONE 1, INC.
100 N. Biscayne Blvd., #1200
Miami, Florida 33132
(305) 371-3300

BankUnited
Coral Gables, FL 33134
63-9059/2670

6342

CHECK DATE
12-FEB-07

CHECK AMOUNT
*****100.00

Pay

One Hundred Dollars And Zero Cents*****

To the
order of

FLORIDA PUBLIC SERVICE COMMISSION
United States

Memo

[Handwritten Signature]

AUTHORIZED SIGNATURE MP

PHONE 1, INC.

DATE: 12-FEB-07 VENDOR NO.: 244

INVOICE NO.	INVOICE DATE	DESCRIPTION	NET AMOUNT
FL-RAE/M	12-FEB-07	2007 RAF Ph1Smart min.	100.00
		DEPOSIT DATE 722 FEB 19 2007	
		DOCUMENT NUMBER-DATE 01579 FEB 16 07	TOTAL 100.00

FPSC-COMMISSION CLERK

6342

Competitive Local Exchange Company Regulatory Assessment Fee Return

STATUS:

Florida Public Service Commission
(See Filing Instructions on Back of Form)

FOR PSC USE ONLY	
Check# <u>6341</u>	
\$ <u>50.00</u>	06-03-001 003001
\$ <u>2.50</u> P	06-03-001 004011
\$ <u>.50</u> I	
Postmark Date <u>2-15-07</u>	
Initials of Preparer <u>RT</u>	

Actual Return
 Estimated Return
 Amended Return

TX727-05-0-R
Phone 1 Smart LLC
100 North Biscayne Blvd., 25th Floor
Miami, FL 33132-2011
7 22 FEB 19 2007

PERIOD COVERED:
01/01/06 TO 12/31/06

PALA/Records

Please Complete Below If Official Mailing Address Has Changed

(Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS	
		OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Service	\$ _____	\$ _____
2.	Long Distance Services (IntraLATA only) ⁽¹⁾	_____	_____
3.	Access Services	_____	_____
4.	Private Line Services	_____	_____
5.	Leased Facilities & Circuits Services	_____ 0.00	_____ 0.00
6.	Miscellaneous Services	_____ 0.00	_____ 0.00
7.	TOTAL REVENUES		\$ _____
8.	LESS: Amount Paid to Other Telecommunications Companies ⁽²⁾		_____
9.	NET INTRASTATE OPERATING REVENUE for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		_____
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0020)		_____ 50.00
11.	Penalty for Late Payment (see "3. Failure to file by Due Date" on back)		\$ _____ 2.50
12.	Interest for Late Payment (see "3. Failure to file by Due Date" on back)		_____ 0.50
13.	Extension Payment Fee (see "4. Extension" on back)		_____
14.	TOTAL AMOUNT DUE (\$50 MINIMUM)		\$ _____ 53.00 ⁽³⁾

(1) Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.
(2) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).
(3) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

CURRENT COMPANY STATUS
 Facilities-Based Provider
 Reseller
 Other: _____

BILLING INFORMATION
 Complete below if billing agent is other than yourself.

 (Name) (Address: City/State/Zip) (Telephone)

COMPANY INFORMATION
 Do you lease telecommunications' facilities? YES NO
 If YES, who do you lease these facilities from? Name: _____
 Address: _____

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief, the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his/her duty shall be guilty of a misdemeanor of the second degree.

Dilow Barker

 (Signature of Company Official)

COO

 (Title)

2/8/07

 (Date)

Dilow Barker

 (Preparer of Form-Please Print Name)

Telephone Number: 305-371-3300

F.E.I. No. 65-0900847

Phone Records

DEPOSIT DATE

7 22 FEB 19 2007

TG 879

2007

TOTAL \$ 100.00

CK# 6342

\$ 50.00

2-15-07

RT.

6342



PHONE 1, INC.
100 N. Biscayne Blvd., #1200
Miami, Florida 33132
(305) 371-3300

BankUnited
Coral Gables, FL 33134

63-9059/2670

CHECK DATE
12-FEB-07

CHECK AMOUNT
*****100.00

Pay

One Hundred Dollars And Zero Cents*****

To the order of

FLORIDA PUBLIC SERVICE COMMISSION
United States

Memo

[Handwritten Signature]
AUTHORIZED SIGNATURE

PHONE 1, INC.

DATE: 12-FEB-07 VENDOR NO.: 244

INVOICE NO.	INVOICE DATE	DESCRIPTION	NET AMOUNT
FL-RAE/Mi	12-FEB-07	2007 RAF Ph1Smart min.	100.00
			TOTAL 100.00

6342

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

Florida Public Service Commission
(See Filing Instructions on Back of Form)

FOR PSC USE ONLY	
Check# <u>6343</u>	
\$ <u>50.00</u>	06-03-001 003001
\$ <u>2.50</u> P	08-03-001 004011
\$ <u>.50</u>	
Postmark Date <u>2-15-07</u>	
Initials of Preparer <u> </u>	

- Actual Return
 Estimated Return
 Amended Return

TG879-05-0-R
 Phone 1 Smart LLC
 100 North Biscayne Blvd., 25th Floor
 Miami, FL 33132-2011

DEPOSIT DATE

7 22 FEB 19 2007

PERIOD COVERED:
01/01/06 TO 12/31/06

*Pawa
Records*

Please Complete Below If Official Mailing Address Has Changed

(Name of Company)	(Address)	(City/State)	(Zip)
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LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ 0.00
2.	Gross Intrastate Revenue	0.00
3.	LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2. Fees" on back)	()
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 0.00
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	0.00
6.	Penalty for Late Payment (see "3. Failure to file by Due Date" on back)	2.50
7.	Interest for Late Payment (see "3. Failure to file by Due Date" on back)	0.50
8.	Extension Payment Fee (see "4. Extension" on back)	\$
9.	TOTAL AMOUNT DUE (MINIMUM \$50.00)	<u>53.00</u> ⁽²⁾
10.	Number of pay telephones in operation at close of period covered by this Return	_____

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).

(2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief, the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his/her official duty shall be guilty of a misdemeanor of the second degree.



 (Signature of Company Official)

COO _____
 (Title)

2/8/07
 (Date)

Dilowe Barker

 (Preparer of Form-Please Print Name)

Telephone Number: 305-371-3300 Fax Number 305-371-4686

F.E.I.No. 65-1060211



210 N. Park Ave.
Winter Park, FL
32789

P.O. Drawer 200
Winter Park, FL
32790-0200

Tel: 407-740-8575
Fax: 407-740-0613
tmi@tminc.com

February 14, 2007
Via Overnight Delivery

Ms. Beth Salak
Director of Competitive Markets And Enforcement
Attn: Tariff Section
Florida Public Service Commission
2540 Shumard Oaks Boulevard
Tallahassee, Florida 32399

**Re: Phone1 Smart LLC
Cancellation of Registration and Withdrawal of Tariff**

Dear Ms. Salak:

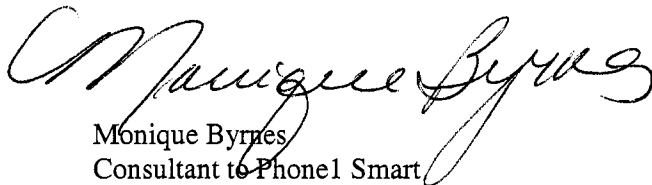
Enclosed for filing are the original and three (3) copies of this letter is to advise the Commission Phone1Smart is hereby requesting cancellation of its certificate of authority for pay telephone authority and local exchange services, and withdrawal of any applicable tariffs. The Company has no customers in Florida and has ceased its operations in the state.

Also attached to this letter are the Florida Regulatory Assessment Fee Returns for the company for 2006 revenue and payment in advance for 2007 as follows:

Phone1 Smart, LLC TG879	\$53.00 for 2006 \$50.00 for 2007
Phone1 Smart, LLC TX727	\$53.00 for 2006 \$50.00 for 2007

Please acknowledge receipt of this filing by date-stamping the extra copy of this cover letter and returning it to me in the self-addressed, stamped envelope provided for this purpose. Any questions regarding this filing should be directed to me at (407) 740-8575. Thank you for your cooperation and assistance in this matter.

Sincerely,


Monique Byrnes
Consultant to Phone1 Smart

Enclosures

cc: P. Yu, Phone1
file: Nationwide Pro Tel - FL
tms: FL0701

Extremely Urgent

UPS 2nd Day Air®

Call 1-800-PICK-UPS® (1-800-742-5877) ** UPS.com®

Apply shipping document

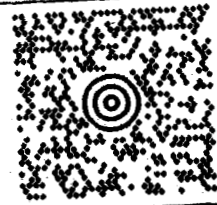
LTR 1 OF 1

- For UPS Next Day Air services, there is no weight limit for envelopes containing correspondence, urgent documents and electronic media. When a UPS Next Day Air service is selected, UPS Express Envelopes containing more than those listed above are subject to the corresponding rates for the applicable weight.
- For UPS Worldwide Express, the UPS Express Envelope can be used only for documents of no commercial value and there is no limit on the weight or number of pages you can send.
- Do not use UPS 2nd Day Air services to send letters weighing over 13 ounces in this envelope. For UPS 2nd Day Air services, UPS Express Envelopes weighing one pound or more are subject to the corresponding rates for the applicable weight.
- Do not send cash or cash equivalent.

15001
 123750621368208199
 07B-1699
 S:OUT
 P:ORANGE
 TALLAHASSEE FL 32399-7019
 FL PUBLIC SERVICE COMMISSION
 2540 SHUMARD OAK BLVD
 TALLAHASSEE FL 32399-7019

SHIPPING DEPARTMENT
 (407) 740-8575
 TECHNOLOGIES MANAGEMENT, INC.
 210 N. PARK AVE.
 WINTER PARK FL 32789-3814

SHIP TO:
 MS. BETH SALAK
 (850) 413-6600
 FL PUBLIC SERVICE COMMISSION
 DIRECTOR - COMPETITIVE MKTS.
 2540 SHUMARD OAK BOULEVARD
 TALLAHASSEE FL 32399-701



FL 323 0-01



UPS NEXT DAY AIR SAVER 1F

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BILLING: P/P