

ORIGINAL

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2008

# Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:  
01/01/2007 TO 12/31/2007

Records / Paula

(See Filing Instructions on Back of Form)

TG822-07-0-R  
 Kenneth Thomas Collins  
 2348 S.E. 10th Court  
 Pompano Beach, FL 33062-7017

DEPOSIT DATE  
 734 MAR 23 2007

070142-TC

FOR PSC USE ONLY

Check # 08613748702

\$ 50.00 06-03-001  
 003001

\$ \_\_\_\_\_

\$ \_\_\_\_\_ P 06-03-001  
 004011

\$ \_\_\_\_\_ I

Postmark Date 3-20-07

Initials of Preparer PT

Please Complete Below If Official Mailing Address Has Changed

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
CMP 1.	Gross Operating Revenue	\$ <u>5000</u>
COM 2.	Gross Intrastate Revenue	_____
CTR 3.	LESS: Amounts Paid to Other Telecommunications Companies (1)	( _____ )
ECR (see "2. Fees" on back)		
GCL 4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ _____
OPC		
RCA 5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	_____
SCR 6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____
SGA 7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____
SEC		
OTH 8. <u>ALWAYS</u>	Extension Payment Fee (see "4. Extension" on back)	_____
9.	TOTAL AMOUNT DUE (MINIMUM \$50.00)	\$ <u>50.00</u> (2)
10.	Number of pay telephones in operation at close of period covered by this Return	_____

**2007 PAYMENT**

**CANCEL FOR THE SECOND TIME**

*Attention Paula Ister*

(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 official duty shall be guilty of a misdemeanor of the second degree.

*[Signature]* (Signature of Company Official)      owner (Title)      3-20-07 (Date)

Kenneth Collins (Preparer of Form - Please Print Name)      Telephone Number 954 786-1858      Fax Number \_\_\_\_\_