

RECEIVED-FPSC

07 AUG 27 AM 10:48

COMMISSION  
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee  <i>x Amin A Choudhury</i></p> <p>B. Received by (<i>Printed Name</i>) <input type="checkbox"/> Date of Delivery  <i>8-22-07</i></p>
<p>1. Article Addressed to: <i>070564</i></p> <p>C &amp; G Telecommunications  7930 Tatum Waterway Drive, Suite 21  Miami Beach FL 33141-1991</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number  (<i>Transfer from service label</i>)</p>	<p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p> <p><i>PSC-07-0666-PAA-TI</i></p> <p><i>7005 3110 0002 8806 6102</i></p>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

DOCUMENT NUMBER-DATE

07619 AUG 27 06

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