

Interexchange Company Regulatory Assessment Fee Return

080076-77

STATUS: **RECEIVED-FPSC** Florida Public Service Commission

(See Filing Instructions on Back of Form)

- Actual Return
- Estimated Return
- Amended Return

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

Final Return

TJ865-07-0-R
SNC Communications, LLC
520 Navarre Avenue
Orlando, FL 33134-4232
COMMISSION CLERK
Records + Power
DEPOSIT DATE
818 FEB 04 2008

FOR PSC USE ONLY	
Check #	1567
\$ 700.00	06-03-001 003001
\$ _____ E	
\$ _____ P	06-03-001 004011
\$ _____ I	
Postmark Date	1/30/08
Initials of Preparer	rm

Please Complete Below If Official Mailing Address Has Changed

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

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS REVENUE	
		OPERATING REVENUE	INTRASTATE REVENUE
1.	Long Distance Services	\$ 0	\$ 0
2.	Access Services	0	0
3.	Private Line Services	0	0
4.	Leased Facilities & Circuits Services	0	0
5.	Miscellaneous Services	0	0
6.	TOTAL Telephone Services	\$ 0	\$ 0
7.	LESS: Amounts Paid to Telecommunications Companies ⁽¹⁾	(0)	(0)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation		\$ 0
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0020)		0
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)		0
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)		0
12.	Extension Payment Fee (see "4. Extension" on back)		0
13.	TOTAL AMOUNT DUE (\$700.00 MINIMUM)		\$ 0 ⁽²⁾

(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 \$700 shall be imposed as provided in Section 364.336, Florida Statutes.

CURRENT COMPANY STATUS

- Facilities-Based Carrier
- Reseller
- Call Aggregator
- Alternate-Operator Service
- Rebiller
- Other: _____

BILLING INFORMATION

Complete below if billing agent is other than yourself.

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

What is the total amount of customer deposits collected?
Amount: \$ _____ for 20 _____

What is the total amount of bond held (if applicable)?
Amount: \$ _____ Expires: _____

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.

Mania L. Herrera
(Signature of Company Official) Business Manager (Title) 1/08/08 (Date)
 Mania L. Herrera (Preparer of Form - Please Print Name)
 Telephone Number (305) 637-4762 Fax Number (305) 637-5148
 F.E.I. No. 02-0699650

DOCUMENT NUMBER - DATE
00853 FEB-1 08
FPSC - COMMISSION CLERK

Date: 1/29/2008

Division of the Commission Clerk and Administrative Services
Fiscal Services Section
2540 Shumard Oak Boulevard
Tallahassee, FL 32399

Dear Sir/Madam:

This letter is to request cancellation of our Interexchange certification number TJ865-06-0-R effective 12-31-2007, SNC Communications, LLC has never provided long distance services.

Enclosed please find a copy of this letter for you to stamp and returned in the self address enveloped also included.


If you have any questions please do not hesitate to call us at 305-476-0001.

Sincerely,



Francisco Vanegas
Business Development Mgr.
WWW.SNCCOM.NET

 Dade (305) 476-0001  Cell (786) 344-7123

 Fax (305) 636-5148

SNC Communications, LLC
520 Navarre Ave, Coral Gables, FL 33134
(305) 476-0001 (305) 636-5148
DOCUMENT NUMBER-DATE
148853 FEB-18

FPSC-COMMISSION CLERK

SNC Communications LLC
520 Navarre Avenue
Coral Gables, FL 33134.

RETURN RECEIPT
REQUESTED

DOCUMENT NUMBER-DATE

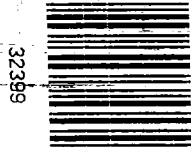
00853 FEB-18

FPSC-COMMISSION CLERK

CERTIFIED MAILTM



7007 1490 0002 5978 1123



32399

U.S. POSTAGE
PAID
MIAMI, FL
33116
JAN 30, 08
INDUENT
0057329-112

\$5.38

ATTN: FISCAL
FLORIDA PUBLIC SERVICE COMMISSION
2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FL 32399-0876

