

090059TC



RECEIVED-FPSC  
09 JAN 29 PM 1:11  
COMMISSION  
CLERK

To Whom it may Concern

As of April 08 I am no longer  
in the payphone business. I sold my  
business.

Please take me off your list.

Thank you

ADRIAN PALMA

FEARLESS CORP

TE 902-58-0-K

DOCUMENT NUMBER-DATE

00738 JAN 29 8

FPSC-COMMISSION CLERK

# Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:

01/01/2008 TO 12/31/2008

*Records + Paula letter attached*

(See Filing Instructions on Back of Form)

TE902-08-0-R  
 Ferob Corporation  
 845 5th Street  
 Miami Beach, FL 33139-6511

**DEPOSIT**

897 - JAN 30 2009

Please Complete Below If Official Mailing Address Has Changed

**FOR PSC USE ONLY**

Check # 6695

\$ 100.00 06-03-001  
003001

\$ \_\_\_\_\_ E

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

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

Postmark Date 1-27-09

Initials of Preparer RT

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>1116.12</u>
2.	Gross Intrastate Revenue	<u>55.80</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies <sup>(1)</sup> (see "2. Fees" on back)	( _____ )
4.	<b>TOTAL REVENUES for Regulatory Assessment Fee Calculation</b> (Line 2 less Line 3)	\$ <u>2232.24</u>
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	<u>4.46</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____
8.	Extension Payment Fee (see "4. Extension" on back)	_____
9.	<b>TOTAL AMOUNT DUE (MINIMUM \$100.00)</b>	\$ <u>100<sup>00</sup></u> <sup>(2)</sup>
10.	Number of pay telephones in operation at close of period covered by this Return	<u>2</u>

(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 \$100 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 of Company Official) Vice President (Title) \_\_\_\_\_ (Date)

ADRIAN PALMA  
 (Preparer of Form - Please Print Name) Telephone Number (305) 672-5577 Fax Number (305) 534-0064

F.E.I. No. 65-0201675