

RECEIVED--FPSC

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COMMISSION
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090287-TI

SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/>  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) ANDRE BRENA</p> <p>C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p>Int'l Solutions, Inc. 12311 S.W. 133rd Court Miami FL 33186-6434</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>PSC-09-0364-PAH-TI 090287-TI</p>	<p>3. Service Type <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 (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7006 0810 0002 3487 6596</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102505-02-04-1540</p>	

DOCUMENT NUMBER-DATE

05813 JUN 10 8

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