


RECEIVED-FPSC

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COMMISSION
CLERK

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.	A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:	B. Received by (Printed Name) C. Date of Delivery SERGIO LUIZ 7/29
Surftel, Inc. Mara Dragoslavic 1800 West Broward Blvd. Ft. Lauderdale, FL 33312	D. Is delivery address different from item 1? If YES, enter delivery address below: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1A0120-TC PSC-12-0373-PAA-TC	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.
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
PS Form 3811, February 2004	7010 0780 0002 2867 9298 Domestic Return Receipt 102595-02-M-1540

DOCUMENT NUMBER-DATE

05045 JUL 30 04

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