REQUEST TO ESTABLISH DOCKET (PLEASE TYPE)

	,	PLEASE ITPE)	0.000
Dat	te <u>9/13/99</u>		Docket No. 991379-TC
1. Division Name/Staff Name Communications/NcCoy			
2.	OPR Communications/McCoy		
3.	OCR Legal Services		
4.	Suggested Docket Title Request for Cancel	lation of Pay Telephone	: Certificate No. 3060 by
Broward Business Services, Incorporated, effective September 10, 1999.			
5. Suggested Docket Mailing List (attach separate sheet if necessary)			
	 A. Provide NAMES ONLY for regulated companies or ACRONYMS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C. B. Provide COMPLETE name and address for all others. (<u>Match representatives to clients.</u>) 		
	1. Parties and their representatives (if a	any)	
_			
2. Interested Persons and their representatives (if any)			
6. Check one: XX Documentation is attached.			
	Documentation will be provided	d with recommendation.	
I:\PSC\RAR\WP\ESTDKT.			

PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE



August 26, 1999

Walter D'Haeseleer, Director Public Service Commission Division of Telecommunications Capital Circle Office Center 2540 Shumard Oak Blvd. Tallahassee, FL 32399-0850 RECEIVED

SEP 1 0 1999

CMU

RE: Pay Telephone Service Certificate Number #3060

Dear Mr. D'Haeseleer:

Broward Business Services, Inc. no longer desires to provide Pay Telephone Service and wishes to cancel our Certificate Number 3060 in accordance with the regulations of the Commission.

Please find the enclosed original certificate issued to us July 13, 1992. If you should have any questions, please don't hesitate to call me at 954-973-7300.

Sincerely yours

Stephen Shooster

President

MGM Enclosure

State of Florida

Commissioners: THOMAS M. BEARD, CHAIRMAN BETTY EASLEY J. TERRY DEASON SUSAN F. CLARK LUIS J. LAUREDO



DIVISION OF COMMUNICATIONS WALTER D'HAESELEER DIRECTOR (904) 488-1280 850 - 413-6170

Public Service Commission

PROVIDER NAME

:BROWARD BUSINESS SERVICES, INCORPORATED

MAILING ADDRESS

:777 SOUTH STATE RD 7 STE. 5 MARGATE, FL 33068

CERTIFICATE NUMBER:3060

DATE MAILED

:JULY 13, 1992

Dear Applicant:

Here is your certificate to provide Pay Telephone Service (PATS). Please complete the enclosed card and return it to us as soon as possible.

It is your obligation to inform this Commission within ten days if one or more of the following occurs:

- A. A change of address
- B. A change of telephone number
- C. A change of person for PSC contact
- D. A change in ownership
- E. No longer in business and wish to cancel your Certificate

Please keep this certificate in a safe place. In the event that you no longer desire to provide Pay Telephone Service and wish to cancel your certificate, you must return the original certificate along with any Regulatory Assessment Fee that is due. Should you have any questions, don't hesitate to call me at (904) 488-1280.

J. HCCI CI,

Pamela Johnson

amela

Regulatory Analyst

Bureau of Service Evaluation

PJ/emd 0257C(16)