ORIGINAL

1796-PAA

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | |
|--|---|--|
| 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 is space permits. | A. Received by (Please Mint Glearly) B. Date of Delivery C. Signature X Quantum Addressee D. Is delivery address different from item 1? Yes | |
| 1. Article Addressed to: 001068-TC | If YES, enter delivery address below: | |
| Larry Wayne Astolfi 1126 South Federal Highway. Suite 527 Ft. Lauderdale FL 33316-1257 | | |
| | Express Mail Return Receipt for Merchandise C.O.D. | |
| | ? (Extra Fee) | |
| 2. Article Number (Copy from service label) 76000060060000000000000000000000000000 | | |
| PS Form 3811, July 1999 Domestic Ref | turn Receipt 102595-99-M-1789 | |

| APP | What tour to the state of |
|------------|---------------------------|
| CAF | - |
| CMP COM | *********** |
| CTR | |
| ECR | |
| LEG | - |
| OPC | ********** |
| PAI | |
| RGO | |
| SEC | 1 |
| SER | |
| OTU | |

DOCUMENT NUMBER-DATE