## TO ANOTO PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/31/2011 Competitive Local Exchange Company Regulatory Assessment Fee Return

		Florida Public Service Commission	FOR PSC USE ONLY
STATUS	S:	(See Filing Instructions on Back of Form)	Check # _ 1159
Actual Return		TY013-10-0-R	\$ 600; CD 06-03-001
Estimated Return Amended Return		Discount Phone Services, Inc. 3140 Ashmonte Drive	\$E
PERIOD COVERED: 05/24/2010 TO 12/31/2010		DEI OOM DAME	004011
03/24/2010	) 10 12/31/2010	0.0 6.7 0 11	
Record		1 99 27 27 Qoll	Postmark Date 1-21-11
			Initials of Preparer
		Please Complete Below If Official Mailing Address Has Changed	J
	(Name of Company)	(Address)	(City/State) (Zip)
1.2.2		FLORIDA (	CDOSS
LINE NO.	ACC	COUNT CLASSIFICATION OPERATING I	
1.	Basic Local Services	\$	& s
2.	Long Distance Services	s (IntraLATA only)(1)	
3. 4.	Access Services Private Line Services	-	
5.	Leased Facilities & Cir	cuits Services	78 34
6.	Miscellaneous Services		
7.	TOTAL REVENUES		ss
8.		o Other Telecommunications Companies <sup>(2)</sup>	<del></del>
9.		OPERATING REVENUE for Regulatory Assessment Fee Calculation (Line	e 7 less Line 8)
10. Regulatory Assessment Fee Due (Multiply Line 9 by 0.0020)  11. Penalty for Late Payment (see "3. Failure to File by Due Date" on back)			<del>- X</del>
12.	Interest for Late Payme	ent (see "3. Failure to File by Due Date" on back)	
13.	Extension Payment Fee	e (see "4. Extension " on back)	
14.	TOTAL AMOUNT D	UE (\$600.00 MINIMUM)	s 600-00°
	(1) Other long distance	erevenue must be listed on the Interexchange Regulatory Assessment Fee Related by intrastate only and must be verifiable (see "2. Fees" on back).	eturn.
	(3) Regardless of the g	gross operating revenue of a company, a minimum annual regulatory assessm	nent fee of \$600 shall be imposed as provided in
	Section 364.336, F	Iorida Statutes.	
M(		CURRENT COMPANY STATUS	
	ies-Based Provider	( ) Receller	e open 2 26
-		() Other: ////CPA NOVE	
CR	<del></del>	BILLING INFORMATION	PM
Complete b	below if billing agent is oth	ner than yourself.	19 PS
AU	(Name)	(Address: City/State/Zip)	(Telephone)
SC		40-0-0-0	(100)
DM	se telecommunications' fa	company information cilities? ( ) YES ( ) NO	
HYSS, wh	o do you lease these facili	ties from? Name:	
AldKs:	10nnye		
I, the	undersigned owner/officer	r of the above-named company, have read the foregoing and declare that	to the best of my knowledge and belief the above
the intent to	n is a true and correct state o mislead a public servant	ement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever in the performance of his official duty shall be guilty of a misdemeanor of the	e second degree.
, ,	1/1/1	Done	1-207-11
	(Signature of Compa	any Official) (Title)	(Date)
m.	1/00/		2 MA SOMEWALL A HOUR DALL
11/	CHAP / K		7-11/6 Fax Number ( ) 5 Amp
(P	reparer of Form - Ple	· ·	00610 JAN 26 =
		F.E.I. No.	· ·

AFTER HALKING to Ton. Eman HART.

SHE Told me to write This Letter

TO close This Account. (Piscount Phone 300.)

THIS company never opened so IF YOU

can Please close It As OF AFFERTIVE date Dec 2010

So I get no more Fees That would be

great

Any duestions Please call 1813 949-1116

michael Kirins Kg

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