80/30°

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/31/2000

Interexchange Company Regulatory Assessment Fee Return

	Return							
Pocket	STATUS:  X Actual Return Estimated Return Amended Return		Florida Public Service Commission (See Filing Instructions on Back of Form)  TX282 Sterling Time Company 5701 Hollywood Blvd., Suite A, Hollywood, FL 33021 DEPOSIT DATE			FOR PSC USE ONLY Check# 163  \$ 50.00 0603001 003001 \$ 0603001 004011 \$ 1  Postmark Date 12/8/00 Initials of Preparer MC		
	PERIOD COVERED: 01/01/1999 TO 12/31/1999		D3 96 m DEC 12 2000					
	Sterling Time Company		6455 East Johns Crossing Suite 285		Suite 285	Duluth GA	30097	
		'Name of Company)		(Address)		(City/State)	(Zip)	
	LINE NO.	ACCOUNT CLASS	SIFICATION	FLORIDA TION GROSS OPERATING REVENUE			INTRASTATE REVENUE	
	1. Long Distance Services			\$	0.00	\$	0.00	
	<ol> <li>Access Services</li> <li>Private Line Services</li> </ol>							
	4. 5.	Leased Facilities & Circuits S Miscellaneous Services	ervices				-	
	6. TOTAL Telephone Services 7. LESS: Amounts Paid to Other Telecommunications Companies			\$0.00		\$0.00		
	(see "2. Fees" on back)  8. TOTAL REVENUES For Regulatory Assessment Fee Calculation  9. Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)			()		(		
					12.50		<i>.</i> -	
	10. Penalty for Late Payment (see "3. Failure to File by Due Date" on back)  11. Interest for Late Payment (see "3. Failure to File by Due Date" on back)  5.50					68.00	į	
	12. TOTAL AMOUNT DUE \$							
	* These amounts must be intrastate only and must be verifiable.							
APP	AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50							
CMP								
COM	/ NP 1911	710		COMPANY STAT				
French .		es-Based Carrier ne-Operator Service	(★) Reseller ( ) Rebiller	( ) Call Ag. ( ) Other:_	gregator 			
LEG .	BILLING INFORMATION  Complete below if billing agent if other than yourself.							
PAI			-,			( )		
RGO SEC I	What is the t	(Name) total amount of customer deposition for 19	ts collected?	(Address: City/State		(Teleph total amount of bond held (if applied Expires:		
OTH	- 0		COMMA	ADV INFORMATION	T	·		
COMPANY INFORMATION  Do you long telegomentions' facilities? ( ) VES								
Look for: blue background on the front of this check, and the imageSafe© logo on back. If not present, do not eash.								
678-775-2244							1463	
	1	6455 EA	ST JOHNS CROSSING, SUIT DULUTH, GA 30097	E 200		017/50	64-5/610 GA	
	DATE (2) ((C) 5)							
	PAY TO THE OF ORDER OF ATVICE COMMISSION					\$ 680	0	
4						60	NANGE (A)	
	- AND ETENT					JO DOLLA	R.S. Becurity feetures are transded. Details on back	
7	Bank 119.07(1)(z), Florida Statutes: Bank account number						\$282828	
-		or debit, char	ge, or credit card nur	nbers given to a	an 🔊	ODOCUMENT NUM	TOER SOATE	
	AC		purpose of payment of any fee or debt			) N 15812 pecus		
	E					W	ULG II G	
	owing are confidential and exempt from subsection (1) and s.24(a), Art. 1 of the State Constitution				RPSC-RECORDS	PEPORTING		
and s.2 (a), Art. I of the state Constitution							50 N PS 95 95 95	