

041027

Pay Telephone Service Provider Regulatory Assessment Fee Return

TOTAL \$ 118.00

ORIGINAL

Florida Public Service Commission
(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2004 TO 12/31/2004

TG450-04-0-R
Texaco of Stuart
3200 SE Federal Highway
Stuart, FL 34997-4912
Docket No. 041027-TC (Isler)

DEPOSIT DATE
514 DEC 28 2004

FOR PSC USE ONLY

Check# 2381

\$ 50.00 06-03-001
003001

\$ _____ P 06-03-001
004011

\$ _____ I

Postmark Date 12-20-04
Initials of Preparer RT

Please Complete Below If Official Mailing Address Has Changed

(Name of Company)

(Address)

(City/State)

(Zip)

LINE NO.	ACCOUNT CLASSIFICATION	CMP	COM	CTR	ECR	GCL	OPC	MMS	RCA	SCR	SEC	OTH	AMOUNT
1.	Gross Operating Revenue (Florida)		\$.00										
2.	Gross Intrastate Revenue			-00									
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)												
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)		\$.00										
5.	Regulatory Assessment Fee Due -- (Multiply Line 4 by 0.0015)							\$ 50.00					
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)												
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)												
8.	TOTAL AMOUNT DUE							\$ 50.00					

AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return 0

* These amounts must be intrastate only and must be verifiable.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

Martin Koules
(Signature of Company Official)

President (Title) 12-18-04 (Date)

Telephone Number 772 286-4971 Fax Number SAME

(Preparer of Form - Please Print Name)

F.E.I. No. 65-0857693

DOCUMENT NUMBER DATE

13495 DEC 27 8