#970861-TC

PLEASE COMPLETE THIS PAGE AND RETURN TO:

Ms. Brenda H. Hawkins, Regulatory Analyst FLORIDA PUBLIC SERVICE COMMISSION Division of Communications Capital Circle Office Center 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

NAME: Jesus Vargas & Vince	<u>ent Garci</u> a
NAME OF COMPANY:	
ADDRESS: 734 E. Memorial E	Blvd.
CITY/STATE/ZIP: Lakeland, FL 338	301-8806
PHONE # W/AREA CODE: (941) 686-69	158
CERTIFICATE #: 4479 COMPANY CODE:	TF542
(Answer "YES" to one of the following statements below.)	
(1) I request that my certificate be cancelled and enclosed	is my Regulatory
(1) 1 request that my definitions of definitions and discount	
Assessment Fee, penalty and interest owed to date.	
Assessment Fee, penalty and interest owed to date.	
Assessment Fee, penalty and interest owed to date (2) I am not able to submit my Regulatory Assessment Fee	
Assessment Fee, penalty and interest owed to date (2) I am not able to submit my Regulatory Assessment Fee	e, penalty and interest
Assessment Fee, penalty and interest owed to date. (2) I am not able to submit my Regulatory Assessment Fee at this time, but will submit it	date
Assessment Fee, penalty and interest owed to date. (2) I am not able to submit my Regulatory Assessment Fee at this time, but will submit it Explain why you are requesting cancellation of your certificate. I am requesting cancellation of my certificate because	date Garcia 15
Assessment Fee, penalty and interest owed to date. (2) I am not able to submit my Regulatory Assessment Fee at this time, but will submit it Explain why you are requesting cancellation of your certificate.	date Garcia 15
Assessment Fee, penalty and interest owed to date. (2) I am not able to submit my Regulatory Assessment Fee at this time, but will submit it Explain why you are requesting cancellation of your certificate. I am requesting cancellation of my certificate because	date Garcia 15

07150 JUL 165

970861-TC

7/16/97 . CONTACT DETAIL RECORD SCREEN 9:59 AM
_NUM: P96000076769 ST:FL ACTIVE/FL PROFIT FLD: 09/16/1996

_FEI#: 59-3399628

_NAME : TAPATIO'S RESTAURANTE MEXICANO INC.

...PRINCIPAL: 734 E, MEMORIAL BLVD. ...ADDRESS LAKELAND, FL 33801

_RA NAME : VARGAS, JESUS B

_RA ADDR : 734 E, MEMORIAL BLVD.

LAKELAND, FL 33801

_ANN REP : (1997) BY 04/09/97

_1. MENU, 3. OFFICERS, 7. LIST, 8. NEXT, 9. PREV

_ ---- THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT ---LENTER SELECTION AND <CR>: >

#970861-Te

PLEASE COMPLETE THIS PAGE AND RETURN TO:

Ms. Brenda H. Hawkins, Regulatory Analyst FLORIDA PUBLIC SERVICE COMMISSION Division of Communications Capital Circle Office Center 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

	as É Vincent Garcia
NAME OF COMPANY:	
ADDRESS: 734 E. Me	
	nd, FL 33801-8806
PHONE # W/AREA CODE: (941)	686-6958
CERTIFICATE #: 4479	COMPANY CODE: TF542
(Answer "YES" to one of the following st	atements below.)
(1) I request that my certificate	be cancelled and enclosed is my Regulatory
Assessment Fee, penalty an	d interest owed to date.
	d interest owed to date. Regulatory Assessment Fee, penalty and interest
	Regulatory Assessment Fee, penalty and interest
(2) I am not able to submit my	Regulatory Assessment Fee, penalty and interest
(2) I am not able to submit my	Regulatory Assessment Fee, penalty and interest it
at this time, but will submit Explain why you are requesting cancellation	Regulatory Assessment Fee, penalty and interest it
at this time, but will submit Explain why you are requesting cancellation	Regulatory Assessment Fee, penalty and interest it date on of your certificate.
at this time, but will submit Explain why you are requesting cancellation. I am requesting cancellation of my certific	Regulatory Assessment Fee, penalty and interest it date on of your certificate.

Dear: Us. Hawkins

Please cancel certificate
4479/TF 542. Thank you,
for your attention to this
matter.

Bandon Vargas