

REQUEST TO ESTABLISH DOCKET  
(PLEASE TYPE)

Date: 03/23/98

Docket No. 980421-70

1. Division Name/Staff Name: Division of Communications/Isler

2. OPR: Division of Communications/Isler

3. OCR: Division of Legal Services

4. Suggested Docket Title: Request for cancellation of <sup>PTC</sup> pay telephone certificate number 3432 by Nikko M. Ellala & Maria Imelda Aquino-Ellala, effective March 12, 1998

5. Suggested Docket Mailing List (attach separate sheet if necessary)

A. Provide NAMES ONLY for regulated companies or ACRONYMS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C.

B. Provide COMPLETE name and address for all others. (Match representatives to clients.)

1. Parties and their representatives (if any)

Nikko M. Ellala & Maria Imelda Aquino-Ellala  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Interested Persons and their representatives (if any)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Check one:

Documentation is attached.

Documentation will be provided with the recommendation.

I:\PSC\RAR\WP\ESTDKT.  
PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE

**03479** MAR 24 8

FPSC-RECORDS/REPORTING

TO: RECORDING (CANCELLATION OF CERTIFICATE)

Maxtel, Inc - 97

RECEIVED

MAR 12 1998

CMU

- Certificate number: TE 904
1. gross operating Revenues : 10,027.91
  2. gross intrastate Revenue : 314.91
  3. less amounts paid to local telephone companies : 3,585.63
  4. Total Revenues (line 2 less line 3):  $\phi$
  5. Regulatory Assessment Fee : 50.00
  6. penalty for late payment : 5.13
  7. Interest for late payment : 1.10
  8. Total amount due : 56.23
  9. Number of telephones in operation at the end of period 12

Business sold Oct. 20, 1997. No Revenues after that.  
(enclosed please find purchase agreement).

Please, for further contacts change address From:  
P. O. Box #301, Miami, FL, 33256 To: 9278 SW 146 PL, Miami  
FL 33186. Thank you. TEL: (305) 380-1762.

Mikko Elala

Mikko ELLALA  
President  
Maxtel, Inc.

3.10.98

Date

# Pay Telephone Service Provider Regulatory Assessment Fee Return

## Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

Actual Return  
 Estimated Return

TE904	P173 997 718
Mikko M. Ellala & Maria Imelda Aquino-Ellala	
13501 S.W. 84th Avenue	
Miami, FL 33186-6625	
DEPOSIT	DATE
D726-	MAR 12 1998

FOR PSC USE ONLY	
Check#	2726
\$	50.00 0603002
	003001
\$	5.13 P
	0603002
	004011
\$	1.10 I
Postmark Date	3/10/98
Initials of Preparer	AP

PERIOD COVERED:  
01/01/1997 TO 12/31/1997

Please Complete Below If Address Has Changed

MIKKO ELLALA (Name of Company)      9278 SW 146 PL, MIAMI, FL (Address)      MIAMI, FL 33186 (City/State)      (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue	\$ 10,027.91
2.	Gross Intrastate Revenue	314.91
3.	LESS: Amounts Paid for Services to Local Telephone Companies (Attach Listing)*	(3,585.63)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 0
5.	Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)	50.00
6.	Penalty for Late Payment	5.13
7.	Interest for Late Payment	1.10
8.	TOTAL AMOUNT DUE	\$ 56.23

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

*Nunya Gaint*

MAIL ROOM  
 MAR 12 1998  
 Brenda Hawkins  
 AM 9:03

\*Each amount paid by a pay telephone company to a telecommunications company providing local service for use of the local network shall be deducted from intrastate revenue for purposes of determining the amount of the regulatory fee assessed the pay telephone company.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to be 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.

*Mikko Ellala*  
 (Signature of Company Official)  
MIKKO ELLALA  
 (Please Print Name)

PRES. (Title)      3.10.98 (Date)  
 Telephone Number 305, 380-1762  
 F.E.I. No. 65-0448090

CSC CREDIT SERVICES  
 COLLECTION SERVICES  
 8401 NW 53RD TERRACE, SUITE 120  
 MIAMI, FLORIDA 33166  
 (305) 593-0171 (800) 873-0171

PAGE NO: 1

DEPOSIT DATE  
 D726 MAR 12 1999

ACTIVITY FROM: 02/01/98  
 ACTIVITY THRU: 02/28/98  
 YOUR NO: 8024  
 CHECK NO: 300499590

ST OF FL-PUBLIC SVC COMM.  
 BUREAU OF SPECIAL PROG.  
 THE CAPITOL-ROOM 1001  
 TALLAHASSEE FL 32399-0350

MONTHLY ACTIVITY STATEMENT

TOTAL COLLECTIONS 2122.70

DATE	DEBTORS TRANSACTION	CURRENT BALANCE	N/C	AMOUNT PAID TO CSC	AMOUNT PAID TO YOU	AMOUNT DUE CSC	AMOUNT DUE YOU
022898	A P UTILITIES INC 9800019	103749.57	31	2000.00		370.00	1630.00
020998	JOHN GILBERT FLORES 96004209		30	122.70		22.70	100.00
	COLLECTED MISC 18.50						
	check no. 0300499590						
30	06-03-003-01-003001 TPA26			100.00			
30	06-03-003-01-003001			30.00			
51	07-01-001-01-891003 (X)			32.70			

Brandi Hawkins

CODES

- 30-PAYMENT IN FULL
- 31-PARTIAL PAYMENT
- 32-FORWARDED REC'D
- 33-FULL PAYMENT W/INTEREST
- 34-FINAL PAYMENT
- 35-SETTLEMENT IN FULL
- 36-LEGAL PARTIAL PAYMENT
- 37-LEGAL FINAL PAYMENT
- 38-DEBIT ADJUSTMENT
- 39-COURT COSTS
- 53-ATTY. FEES
- 54-LIST FEES
- 55-BAD ADDRESS FEE
- 56-LETTER FEE
- 58-OTHER
- 60-CREDIT ADJUSTMENT
- 61-YOUR CHECK RECEIVED
- 64-RECEIVED CLNT COLL COSTS
- N-NSF CHECK
- C-POSTING ERROR

OUR CHECK ENCLOSED FOR

1730.00

SUB-TOTAL AMOUNT DUE YOU (+) > 1730.00  
 SUB-TOTAL AMOUNT DUE YOU (-) > 0.00

PLEASE RETURN TO CSC	TOTAL PAID TO CSC	TOTAL PAID TO YOU	AMOUNT DUE CSC	AMOUNT DUE YOU
	2122.70	0.00	392.70	1730.00