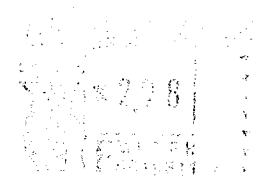


State of Florida  
**Public Service Commission**

2540 Shumard Oak Boulevard  
 Tallahassee, Florida 32399-0850

**ORIGINAL**

*ANK-1630*



**REASON CHECKED**  
 Unclaimed Refuser  
 Attention Not Known  
 No Return Address  
 No Return Address

Zayin Incorporated  
 Ahimelech Israel  
 5800 Barnes Road #190  
 Jacksonville FL 32216-5592



**CERTIFIED MAIL**  
 Return Receipt Req  
*99-263*

the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

*991073*

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

Zayin Incorporated  
 Ahimelech Israel  
 5800 Barnes Road, S., #190  
 Jacksonville FL 32216-5592

Number *99-263*  
 Certified  
 Insured  
 COD  
 for Merchandise  
 City

Thank you for using Return Receipt Service.

is your RETURN

5. Received By: (Print Name)  
 6. Signature: (Addressee or Agent)  
*X*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811 December 1994

Domestic Return Receipt

DOCUMENT NUMBER - DATE

**13388 NOV -1 99**

FPSC-RECORDS/REPORTING

