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COMMISSION CLERK

DOCUMENT NUMBER-DATE
09211 OCT-8 07
FPSC-COMMISSION CLERK

State of Florida
Public Service Commission
250 Shumaker Oaks Parkway
Tallahassee, Florida 32309-0850



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 070490
Amigos Telefonica
2727 Fillmore Street
Hollywood FL 33020-4329

2. Article Number (Transfer from service label) Psc-07-0739-Co-77
7006 2760 0003 8797 5818

PS Form 3811, February 2004 Domestic Return Receipt 10259-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

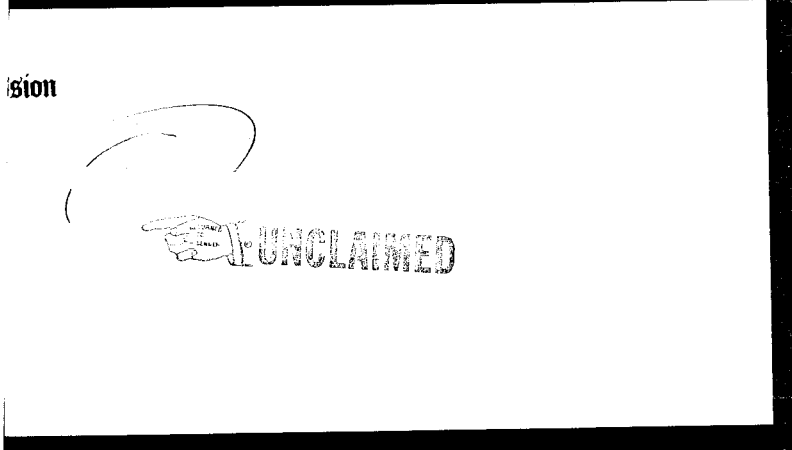
B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D. Yes

4. Restricted Delivery? (Extra Fee) Yes

sion



NAME _____
1st Notice 10/11/07
2nd Notice 9-27

7382004102
\$15.940
Mailed From: 32309
US POSTAGE