

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2004

## Interexchange Company Regulatory Assessment Fee Return

aula  
records

## Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

☐ Actual Return  
☐ Estimated Return  
☐ Amended Return

 TJ658-03-0-R  
 Communitel International, LLC  
 6955 N.W. 77th Avenue, Suite 204  
 Miami, FL 33166-2845

PERIOD COVERED:

01/01/2003 TO 12/31/2003

CC: Docket 030821-T1 (P. Isler)

D410

JAN 06 2004

Please Complete Below If Official Mailing Address Has Changed

## FOR PSC USE ONLY

Check# 1131

\$ 50.00 0603001  
003001\$ P 0603001  
004011

\$ I

Postmark Date 12-31-03

Initials of Preparer RT

(Name of Company)

(Address)

(City/State)

(Zip)

## LINE NO. ACCOUNT CLASSIFICATION

FLORIDA  
GROSS OPERATING

## INTRASTATE REVENUE

\$ N/A 0

\$ N/A

\$ N/A 0

\$ N/A 0

\$ N/A 0

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AUS

CAF

CMP

COM

CTR

ECR

GCL

OPC

MMS

SEC

OTH

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

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

## CURRENT COMPANY STATUS

☐ Facilities-Based Carrier  
☐ Alternate-Operator Service

☐ Reseller  
☐ Rebiller

☐ Call Aggregator  
☐ Other:

## BILLING INFORMATION

Complete below if billing agent if other than yourself.

(Name)

(Address: City/State/Zip)

(Telephone)

What is the total amount of customer deposits collected?

Amount: \$ for 19

What is the total amount of bond held (if applicable)?

Amount: \$ Expires:

## COMPANY INFORMATION

Do you lease telecommunications' facilities? ☐ YES ☐ NO

If YES, who do you lease these facilities from? Name:

Address:

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 337.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his/her duty shall be guilty of a misdemeanor of the second degree.

(Signature of Company Official)

(Title)

(Date)

Elsa Pelayo Lopez  
(Preparer of Form - Please Print Name)

Telephone Number 305 888-4212 Fax Number 305 883-6701

F.E.I. No. 05-1041011 DOCUMENT NUMBER-DATE

00118 JAN-6

**COMMUNITEL INTERNATIONAL, LLC.  
6955 N.W. 77<sup>TH</sup> AVENUE  
SUITE 207  
MIAMI, FL 33166**

December 15, 2003

Ms. Paula Isler  
Public Service Commission  
2450 Shumard Oak Boulevard  
Tallahassee, FL 32399-0850

**RE: DOCKET NUMBER 030821-T1 (P.Isler)**

Dear Ms. Isler:

Communitel International, LLC is not a service provider. As such, we are hereby terminating IXC Registration No. TJ658-03-0-R issued to Communitel International, LLC.

We are enclosing Check 1131 in the amount of \$50.00 for the following:

\$50.00      Annual fee for the year 2003

Should you have any questions regarding the above, please do not hesitate to contact me at 305-888-4212

Sincerely,

  
Elsa Pelaez-Lopez

Enclosures

04 JAN -5 AM 8:46  
DISTRIBUTION CENTER