



Public Service Commission

DATE: March 5, 1999

TO: Division of Records and Reporting (Bayo)

FROM: Division of Communications (Isler) *Dij*

RE: Docket No. 981901-TI - Cancellation by Florida Public Service Commission of IXC Certificate No. 5206 issued to Hello Card, Inc., for violation of Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies

Order No. PSC-99-0329-FOF-TI was issued February 19, 1999, and ordered the company to pay a \$500 fine plus past due regulatory assessment fees, along with statutory penalty and interest charges. On March 4, 1999, the Division of Administration provided me a copy of the company's 1998 RAF form and letter which advised that it had ceased doing business. The letter and form were originally received by Administration on February 9, 1999. Since staff needs to take this back to Agenda, please use the attached from the company as its response to the Order.

Attachment

cc: Division of Communications (Isler)
Division of Legal Services (K. Peña)

- ACK _____
- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTT _____
- ETT _____
- LEA _____
- LIM _____
- OMC _____
- RCH _____
- SEC 1
- WAS _____
- OTH _____

DOCUMENT NUMBER-DATE
02991 MAR-89
FPSC-RECORDS/REPORTING

981901
PAA 2/19
Closing 3/19

HELLO CARD INC.

2 Bennett • New York, NY 10033 • Phone (212) 928-4400

FLORIDA PUBLIC SERVICE COMMISSION
DIV. OF REGULATORY AFFAIRS
OUT OF OFFICE

February 3, 1999

Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0870

RE.: Hello Card, Inc.
T1660

Dear Sir:

In reference to the attached Interexchange Company Regulatory Assessment Fee Return. This is to advise you that Hello Card, Inc. ceased doing business in Florida in 1997.

Very Truly yours,


Emil Manfredonia
Controller

cc.: Rodger Zepka
Eleno Ramos

RECEIVED

MAR 04 1999

CMI

Interexchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

Actual Return
 Estimated Return

TI660
 Hello Card Inc.
 2 Bennett
 New York, NY 10033

FEB - 9 11 3 23
 MAIL ROOM

FOR PSC USE ONLY

Check# _____

\$ _____ 0603001
 _____ 003001

\$ _____ P
 _____ 0603001
 _____ 004011

\$ _____ 1

Postmark Date _____
 Initials of Preparer _____

PERIOD COVERED:
 01/01/1998 TO
 12/31/1998

Please Complete Below If Official Mailing Address Has Changed

 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Long Distance Services	\$ _____	\$ _____
2.	Access Services	_____	_____
3.	Private Line Services	_____	_____
4.	Leased Facilities & Circuits Services	_____	_____
5.	Miscellaneous Services	_____	_____
6.	TOTAL Telephone Services	\$ _____	\$ _____
7.	LESS: Amounts Paid For Services To Local Telephone Companies* (Attach Listing)	(_____)	(_____)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation	_____	_____
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)	_____	_____
10.	Penalty for Late Payment	_____	_____
11.	Interest for Late Payment	_____	\$ _____
12.	TOTAL AMOUNT DUE	_____	_____

*Each amount paid by an interexchange telecommunications 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 interexchange telecommunications company.

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

CURRENT COMPANY STATUS

Facilities-Based Carrier Reseller Call Aggregator
 Alternate-Operator Service Rebiller 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 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/her duty shall be guilty of a misdemeanor of the second degree.

 (Signature of Company Official) (Title) (Date)

 (Please Print Name)

Telephone Number (_____) Fax Number (_____)

F.I.L. No. _____