080323

то) AVOID PEN	ALTY AND INTEREST CHARGES Pay Teleph	, the regulatory assessment feer	ETURN MUST BE FILED ON OR BEFORE 01/30/2008 ET Regulatory Assessment	Fee Return
		v 1		Service Commission	FOR PSC USE ONLY
S	STATUS:		(See Filing Insta	rections on Back of Form)	Check #O
>	K Actua	1 Return	TC517-07-0-R		s <u>131-000</u> 06-03-001
4		ated Return	Richard M. Slezak Pay Telephones		003001
_		ided Return	12100 Gulf Blvd.	_	\$E
			Treasure Island, FL 33	3706-5126	\$P 06-03-001
	PERIOD COVERED: 01/01/2007 TO 12/31/2007 Not Records Net # 080323-TC		B54. JUL 1 5 2003		004011 \$ I
\frown					
Faul	at receivers			JOF 1 5 5000	Postmark Date 7-9-08
N	af # ()RD323-14	Please Complete Below If Of	fficial Mailing Address Has Changed	Initials of Preparer
Docu			Flease Complete Delow II O	tillat wanning Autore has charbon	s D
- F	r citaei	D M. JLEZAK	171000	- POIL	RE ISLAND.FL 33706
_	PAY	TELEPHONES (Name of Company)	12100 GUL	(Address)	(City/State) $(City/State)$ $(Ziph)$
_		(Name of Company)	التصحيحا بيبي الانفسي والفري		
_					우호 5 四
	LINE				HO. B
_	NO.				2 amount -
	1. Gross Operating Revenue (Florida)				<u> </u>
				-	
	2.	Gross Intrastate Revenue			
	3.	LESS: Amounts	Paid to Other Telecomr	and the second sec	
	 LESS: Amounts Paid to Other Telecommunications Companies ((see "2. Fees" on back) 			om (<u> </u>	
	4. TOTAL REVENUES for Regulatory Assessment Fee Calculation				an the second programmer and the second s
				 Contraction of the second secon	
	(Line 2 less Line 3)			\$ <u></u>	
	5. Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)			100	
	6. Penalty for Late Payment (see "3. Failure to File by Due Date" on back			25	
	 Interest for Late Payment (see "3. Failure to File by Due Date" on back Extension Payment Fee (see "4. Extension" on back) TOTAL AMOUNT DUE (MINIMUM \$100.00) 			to File by Due Date" on back)	BOA (a
				to The by Due Dute on buck)	50R
				()))))))))))))))))))))))))))))))))))))	
				SEC <u>\$ 737</u> 80	
	10.	Number of pay telephones in operation at close of period covered by this Return			OTH NO / & M
	10.				
		this Return			ack Jul
					T. I
		 (1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back). (2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$100 shall be imposed as provided in OD 			
	Section 364.336, Florida Statutes.				
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-					
	PERSONAL REPRESENTATIVE, E				
	(Signature of Company Official) BICHARD M. SLEZAKETitle		CHARD M. SLEZAVETitle)	(Date)	
-	FP.	ANK SLEZAK		ephone Number <u>803373-1155</u>	Fax Number ()
	(Preparer of Form - Please Print Name)				
			F.	E.I. No.	

FPSC-COMMISSION CLERK

Estate of Richard M. Slezak 440 West Ontario Street Chicago, IL 60654

CHICAGO IL 606



09 JUL 2008 PM 6 L

Ms. Paula Isler Florida Public Service Commission 2540 Shumard Oak Blvd. Tallahassee, FL 32399-0850

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