

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:

EPIXAR COMMUNICATIONS CORP
11900 BISCAYNE BLVD SUITE 780
MIAMI FL 33180

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

[Signature]

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

George [unclear] *5-09*

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

TC08-151

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

7005 3110 0000 3560 5790