

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:

NEW CENTURY TELECOM INC
3050 ROYAL BLVD S SUITE 175
ALPHARETTA GA 30022

TC10-009

2. Article Number

(Transfer from service label)

7007 0710 0000 8015 0949

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Juan Rojas*

Agent

Addressee

B. Received by (Printed Name)

Juan Rojas

C. Date of Delivery

1.25

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

RECEIVED
JAN 28 2010

3. Service Type

Certified Mail Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes