

# Washington Metropolitan Area Transit Commission

## 2010 Carrier Annual Report Form

**PLEASE NOTE:**

- Each carrier holding a WMATC certificate of authority on January 1, 2010, must file a complete 2010 annual report and pay a \$150 annual fee on or before **February 1, 2010**. To be timely, the report and fee must be received at WMATC's office by this date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a **\$100 late fee**. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate **\$100 late fee**.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 4, 2010.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

**1. ANNUAL REPORT OF:**

592	Adventures By Dawn L.L.C.
<small>*WMATC No.</small>	<small>*Name of Carrier (as shown on certificate of authority)</small>
6307 Aaron Lane, Clinton, MD 20735-2202	
<small>*Street Address of Principal Place of Business</small>	

**Mailing Address (if different from street address)**

(301) 868-1141		(301) 868-7023	adventurebydawn@VERIZON.NET
<small>*Telephone Number</small>	<small>Other Telephone</small>	<small>Fax Number</small>	<small>E-mail</small>

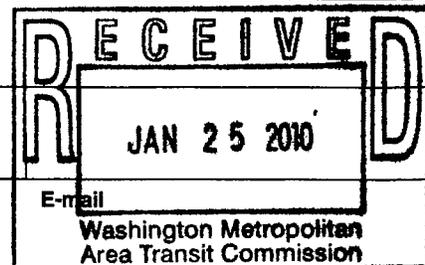
**2. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):**

Mohammed Khan	President & General Manager		
<small>*Name</small>	<small>*Title</small>		
(301) 868 1141	(301) 868-7023	adventurebydawn@VERIZON.NET	
<small>*Telephone Number</small>	<small>Other Telephone</small>	<small>Fax Number</small>	<small>E-mail</small>

**3. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS**

\*(Complete ONLY if Street Address in item 1 is **OUTSIDE** Metropolitan District):

Matthew Jones			
<small>Name of Registered Agent for Service of Process</small>			
336 2 <sup>nd</sup> Street, S.E., Washington, DC 20020-1454			
<small>Street Address</small>			
202-575-1310			
<small>Telephone Number</small>	<small>Other Telephone</small>	<small>Fax Number</small>	<small>E-mail</small>



(continued on next page)



Name: Adventures By Dawn L.L.C.

Trade Name:

**Carriers are required to provide a complete list of revenue vehicles used in WMATC operations. You may choose from the following options: (1) list your vehicles in the space provided on page 2 of the annual report form; (2) make any necessary corrections to this list and submit it with your annual report; or (3) attach your own vehicle list. Failure to report revenue vehicles may result in a civil forfeiture.**

Check this box if all information on this list is complete and accurate.

Fleet No.	*Model Year	*Make	*VIN (17 digits)	*Plate	*State Registered	*Capacity
9911	2006	Prevost	2PCX3349861028867	005P38	MD	55
9912	2006	Prevost	2PCX3349461028851	005P39	MD	55
9914	2007	Prevost	2PCE3349471028821	005P40	MD	55
9915	2006	MCI	1M86DMPA96P057206	005P41	MD	55
9916	2006	MCI	1M86DMPA06P057207	005P42	MD	55
9917	2009	MCI	2M93JMHA39W065036	010P96	MD	56

