

Washington Metropolitan Area Transit Commission

2012 Carrier Annual Report Form

NEW THIS YEAR:

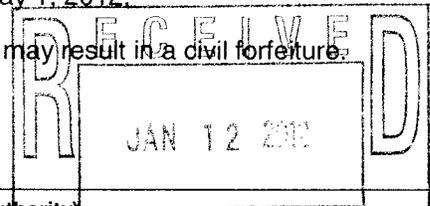
- Annual reports can now be filed online at www.wmatc.gov. Annual fees can also be paid online using a credit or debit card. Your username and password is required to access e-filing.
- Carriers holding U.S. Department of Transportation authority must now indicate their USDOT number. Also, carriers must indicate whether each vehicle in their fleet is equipped with a wheelchair lift or ramp.

FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2012, must file a complete 2012 annual report and pay a \$150 annual fee on or before **January 31, 2012**. To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on 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 **late fee** pursuant to Regulation No. 67-03. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate **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 1, 2012.
- Filing an annual report containing false information, or omitting information, may result in a civil forfeiture.

1. CARRIER:

315		Jet Tours USA, Inc.			
*WMATC No.		USDOT No. (if applicable)		*Name of Carrier (as shown on certificate of authority)	
299 Murray Hill Parkway		Apt./Suite	City	State	Zip
			East Rutherford	NJ	07073-2112
Mailing Address (if different from street address)		Apt./Suite	City	State	Zip
(201) 939-4154		(201) 832-0370	(201) 438-2554	agomez@citytours.com	
*Telephone	Other Telephone	Fax	E-mail		



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

Mr. Guillermo Sanchez		Manager			
*Name		*Title			
(201) 939-4154	(201) 832-0377	(201) 438-2554	gsanchez@citytours.com		
*Telephone	Other Telephone	Fax	E-mail		

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

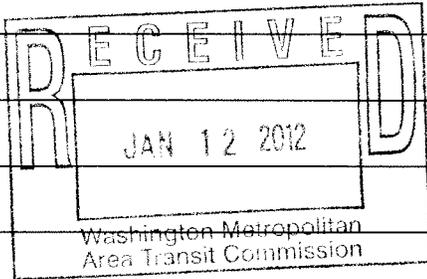
*Complete section 3 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria, Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see www.wmatc.gov.

CSC	(800) 927-9800				
Name of Registered Agent for Service of Process		Telephone	E-mail		
1090 Vermont Ave., N.W.			Washington	DC	20005-4905
Agent Address (must be inside Metropolitan District)		Apt./Suite	City	State	Zip

4. ***CHANGES:** Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

5. ***LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** Choose one, and **only one**, of the following three options: (1) list your vehicles below; (2) make any necessary corrections on the enclosed vehicle list, check the box indicating all information is accurate, and return the list with both pages of this form; **or** (3) attach your own vehicle list to both pages of this form. Include all required information.

Fleet No. If applicable	*Model Year	*Make	*Vehicle VIN (17 digits)	*License Plate Number	*State Registered	*Seating Capacity	*Wheelchair Lift or Ramp Yes/No



6. ***CERTIFICATION:**

I certify that this report, including any attachments, was prepared by me or under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

MARTHA P THOMAS
 *Name (Type or Print)

Martha Thomas
 *Signature

SEC/TREASURER
 *Title

01/06/12
 *Date

Washington Metropolitan Area Transit Commission

2012 Annual Report: Revenue Vehicle List

Name: Jet Tours USA, Inc.

Trade Name:

This list is provided for your convenience and may be used instead of creating your own vehicle list. If you use this list, make any necessary corrections, check the box indicating all information is accurate, and return this list with both pages of your annual report form. Do not forget to indicate whether each vehicle is equipped with a wheelchair lift or ramp. Be sure to sign page 2 of your annual report.

Check this box if all information on this list, including any corrections, is complete and accurate.

Fleet No.	*Model Year	*Make	*VIN (17 digits)	*Plate	*State Registered	*Capacity	*Wheelchair Lift or Ramp Y/N
100	2001	MCI	1M8TRMPA5YP061387	OXY4893	NJ	56	
101	2003	MCI	1M83JMPA33P062151	OXY9387	NJ	56	
102	2006	MCI	2M93JMDA06W063682	OXZ1982	NJ	56	
103	2006	MCI	2M93JMDA96W063681	OXZ3009	NJ	56	
147	2006	Ford	1FBSS31L16HA04666	OXY5066	NJ	15	
148	2006	Ford	1FBSS31L96HA12983	OXY5074	NJ	15	
149	2006	Ford	1FBSS31L16HB08400	OXY9386	NJ	15	
150	2006	Ford	1FBSS31L96DA96794	OXY9393	NJ	15	
151	2007	Ford	1FBSS31L07DA1U386	OX21965	NJ	15	
152	2007	Sprinter	WDOPF445575207451	OX23022	NJ	15	
153	2007	Setra	WDOPF445575216859	OX23025	NJ	15	
154	2008	Ford	1FBSS31L58DB46559	OX23634	NJ	15	
155	2010	Ford	1FBR53BL1ADA18785	OXY4893	NJ	15	
156	2009	Ford	1FBSS31L99DA73911	OX28247	NJ	15	

