

Chris Aquino

From: WMATC E-Filing [administrator@wmatc.gov]
Sent: Monday, January 28, 2013 1:19 PM
To: Chris Aquino
Subject: 2013 Annual Report - WMATC No: 535, Carrier Name: Medride, Inc.

Washington Metropolitan Area Transit Commission
2013 Carrier Annual Report Form

FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2013, must file a complete 2012 annual report and pay a \$150 annual fee on or before **January 31, 2013**. 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 that 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 **\$150 late fee**. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate **\$150 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 2, 2013.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

Read the accompanying instructions carefully before completing this form.

1. ANNUAL REPORT OF:

WMATC No.: 535

Name of Carrier (as shown on certificate of authority): Medride, Inc.

Trade Name:

Principal Place of Business

Street Address: 4906 Buchanan Street

Apt./Suite:

City: Hyattsville

State: MD

Zip: 20781

Mailing Address (if different from street address)

Street:

Apt./Suite:

City:

State:

Zip:

Telephone Number: (301)918-0011
Other Telephone: (202)258-5571
Fax Number: (202)315-3395
E-mail: Medrideinc@verizon.net

2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number):

USDOT No.:
DCTC No.:
Virginia DMV passenger carrier No.:
Maryland PSC No.:

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

Name: Nwokē Dennis
Title: President
Telephone Number: (202)258-5571
Other Telephone:
Fax Number: (301)918-0044
E-mail: medrideinc@verizon.net

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

*Complete section 4 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.

Name of Registered Agent for Service of Process:

Agent Address:
Apt./Suite:
City:
State:
Zip:
Telephone Number:
E-mail:

5. *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.

6. *LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS: (1) list your vehicles below; **or** (2) upload a complete vehicle list to this form. Include **all** required information.

Fleet No.	Year	Make	Vehicle VIN	License Plate	State	Seating Cap.	Wheel Chair
√	2003	Ford E350	1FBSS31LX3HA00501	510-38B	MD	15	No
	2003	Ford E350	1FBSS31LO3HA46936	510-32B	MD	15	No
	2003	Ford E350	1FTNS24LX3HA26286	520-37B	MD	15	No
√	2004	Ford E350	1FDSE35LO4HA18645	510-63B	MD	15	No
	2004	Ford E350	2D4GP44L44RS15989	527-59B	MD	7	No
	2005	Ford E350	1FTNS24W25HA27932	520-36B	MD	15	No
	2007	Ford E350	1FBSS31L97DB29424	510-37B	MD	15	No
	2007	Ford E350	1FBSS31L37DB20430	510-30B	MD	15	No
	2008	Ford E350	1FBSS31L98DA45413	527-53B	MD	15	No
	2009	Ford E350	1FBNE31L49+DA6037	531-59B	MD	15	No

***Filer has chosen vehicle list option (1), vehicles listed above. No vehicle list file was uploaded.**

7. *CERTIFICATION:

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

Name: Nwoke Dennis

Title: President

Date: 01/28/13