

## Chris Aquino

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**From:** WMATC E-Filing <administrator@wmatc.gov>  
**Sent:** Thursday, January 04, 2018 1:01 PM  
**To:** WMATC E-Filings  
**Subject:** 2018 Annual Report - WMATC No: 276, Carrier Name: Airport Metro Connection, Inc.

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### Washington Metropolitan Area Transit Commission 2018 Carrier Annual Report Form

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#### **FILING INFORMATION:**

- Each carrier holding a WMATC certificate of authority on January 1, 2018, must file a complete 2018 annual report and pay a \$175 annual fee on or before **January 31, 2018**. To be timely, the report and fee must be received at the WMATC 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 \$175 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 1, 2018.
- 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.:** 276

**Name of Carrier (as shown on certificate of authority):** Airport Metro Connection, Inc.

**Trade Name:** Excellent Tours

**Principal Place of Business**

**Street Address:** 4920 Niagara Road

**Apt./Suite:** 416

**City:** College Park

**State:** MD

**Zip:** 20740

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

**Street:**

**Apt./Suite:**

**City:**

**State:**

**Zip:**

**Telephone Number:** (301)313-0350

**Other Telephone:** (888)559-5066

**Fax Number:** (301)345-2320

**E-mail:** [reservations@excellentdctours.com](mailto:reservations@excellentdctours.com)

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

**USDOT No.:** 1512245

**DC DFHV No.:**

**Virginia DMV passenger carrier No.:** 961

**Maryland PSC No.:** 2850

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

**Name:** Tsegaye Mamo

**Title:** President

**Telephone Number:** (240)832-5700

**Other Telephone:**

**Fax Number:**

**E-mail:** [tmamo@excellentdctours.com](mailto:tmamo@excellentdctours.com)

**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](http://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. If you have more than 10 vehicles in your fleet, you must use option 2. Include all required information.

<b>Fleet No.</b>	<b>Year*</b>	<b>Make*</b>	<b>Vehicle VIN*</b>	<b>License Plate*</b>	<b>State*</b>	<b>Seating Cap.*</b>	<b>Wheel Chair</b>
444	2017	Ford	1FDFE4FS0HDC58692	035P39	MD	23	Yes
422	2015	Ford	1FDFE4FS6FDA17538	031P60	MD	26	No
401	2012	International	4DRXWSKK3CJ454678	022P40	MD	26	Yes
201	2012	Freightliner	1FVACWDT1CHBF8665	021P44	MD	37	No
218	2016	Freightliner	4UZADRDU0GCHT7913	030P89	MD	36	No
101	2005	MCI	1M86DMDA15P056599	019P97	MD	56	No
301	2012	MCI	2MG3JM8A4CW066180	022P83	MD	57	No
701	2015	MCI	2MG3JM8A6FW067111	028P80	MD	57	No
801	2015	MCI	2MG3JM8A9FW067247	029P96	MD	57	No
901	2017	MCI	2MG3JMBA2HW067909	033P44	MD	57	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:** Tsegaye Mamo

**Title:** President

**Date:** 01/04/2018