

Chris Aquino

From: WMATC E-Filing <administrator@wmatc.gov>
Sent: Tuesday, January 29, 2019 10:00 AM
To: WMATC E-Filings
Subject: 2019 Annual Report - WMATC No: 986, Carrier Name: Innovative Life Solutions, Inc.
Attachments: 5c506a814dbcc-WMATC Annual Report 2019.xlsx

Washington Metropolitan Area Transit Commission 2019 Carrier Annual Report Form

WMATC is Moving:

- The WMATC office will move to a new location in 2019. Beginning on or around **April 1, 2019**, WMATC will be located at 1010 Wayne Avenue, Suite 1240, Silver Spring, MD 20910. Check the announcements section of the WMATC website for further updates.

FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2019, must file a complete 2018 annual report and pay a \$175 annual fee on or before **January 31, 2019**. 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, 2019.
- 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.: 986

Name of Carrier (as shown on certificate of authority): Innovative Life Solutions, Inc.

Trade Name:

Principal Place of Business

Street Address: 8484 Georgia Avenue

Apt./Suite: 900

City: Silver Spring

State: MD

Zip: 20910

Mailing Address (if different from street address)

Street:

Apt./Suite:

City:

State:

Zip:

Telephone Number: 3016412798

Other Telephone: (301)270-4750

Fax Number:

E-mail: bullock@innovativelife.org

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

USDOT No.:

DC DFHV No.:

Virginia DMV passenger carrier No.:

Maryland PSC No.: Maryland

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

Name: Bonita Bullock

Title: Business Manager

Telephone Number: 3016412798

Other Telephone: (301)270-4750

Fax Number:

E-mail: bullock@innovativelife.org

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. If you have more than 10 vehicles in your fleet, you must use option 2. Include all required information.

Fleet No.	Year*	Make*	Vehicle VIN*	License Plate*	State*	Seating Cap.*	Wheel Chair

***Your vehicle list was attached to your submission.**

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: Bonita Bullock
Title: Business Manager
Date: 01/29/2019

Fleet No.	*Model Year	*Make	*Vehicle VIN (17 digits)	*License Number	*State Registered	*Seating Capacity	Wheelchair Lift or Ramp Yes/No
N/A	2017	Ford	1FBZX2CM2HKB02594	B47059	DC	12	Y
N/A	2017	Ford	1FBZX2CM2HKA99065	B47060	DC	12	Y
N/A	2017	Kia	KNDMA5C17H6284106	2CY4126	MD	12	N
N/A	2017	Ford	1FBZX2ZM1HKB47534	B47062	DC	12	N
N/A	2017	Ford	1FBZX2CM6HKA99070	B47058	DC	12	Y
N/A	2017	Ford	1FBZX2ZM4HKB50847	B47067	DC	12	N
N/A	2017	Ford	1FBZX2ZM6HKB50848	B47068	DC	12	N
N/A	2017	Ford	1FBZX2ZM8HKB50849	B47066	DC	12	N
N/A	2017	Ford	1FBZX2CM8HKA99068	B47061	DC	12	Y
N/A	2017	Ford	1FBZX2ZM2HKB50846	B47064	DC	12	N
N/A	2017	Ford	1FBZX2CM1HKB02599	B47057	DC	12	Y
N/A	2017	Kia	KNDMA5C15H6284069	B45776	DC	12	N
N/A	2017	Ford	1FBZX2CM9HKB02589	B47056	DC	12	Y
N/A	2017	Dodge	2C4RDGBG2HR808737	63409HT	MD	12	N
N/A	2012	Ford	1FTNE2EW7CDA97498	B48221	DC	12	Y
N/A	2011	Ford	1FBNE3BL5BDB03480	B48223	DC	12	N
N/A	2010	Ford	1FBNE3BLXADA04488	B48219	DC	12	N
N/A	2010	Ford	1FBNE3BL3ADA01609	B48218	DC	12	N
N/A	2007	Ford	1FBSS31L67DA82983	10419P	MD	12	N
N/A	2011	Kia	KNDMG4670B6366649	10420P	MD	12	N
N/A	2008	Ford	1FTNE24W28DB58099	1BT4002	MD	12	N
N/A	2005	Dodge	1D7HU18D45J626954	31T 682	MD	12	N
N/A	2010	Ford	1FBSS3BL1ADA04102	B48220	DC	12	Y
N/A	2010	Ford	1FBSS3BL9BDA35499	B43336	DC	12	N
N/A	2010	Ford	1FBSS3BLXADA04101	B48217	DC	12	Y
N/A	2010	Ford	1FBNE3BL4ADA01926	B48222	DC	12	N