

B01846

July 12, 2016

Agent Code: 31 21530

City of New York Taxi &
Limo Commissions
33 Beaver St., 22nd Floor
New York, NY 10004

Re: Bond #16106665 - Dileo, John, P. Romantique Limousines Inc
1421 86th Street
Brooklyn, NY 11228
\$5,000.00 - New York City For-Hire Vehicle Base Station Bond
Company Code: 601 - Western Surety Company

On June 24, 2016, we sent you a letter of cancellation for this bond.

We now wish to rescind our initial letter. This bond is to remain in full force and effect with no lapse in coverage. We will continue as surety on this bond.

We are sorry for any inconvenience this may have caused you.

Sincerely,



Eric Kirchner
Underwriting Consultant

cc: M & S Brokerage International, Inc.
Dileo, John, P. Romantique Limousines Inc



**Taxi & Limousine
Commission**

Meera Joshi – Commissioner
Gary Weiss – Deputy Commissioner
Licensing and Standards
31-00 47th Ave, 3rd Fl
Long Island City, NY 11101
www.nyc.gov/tlc

DIRECTIVE

Date: 2/6/2017

License Number: B01846

ROMANTIQUE LIMOUSINE INC.
1421 86 STREET
BROOKLYN, NY, 11228

Taxi and Limousine Commission (TLC) Rule §59B-12(a)(1)(iv) requires that all bases that are not members of the Livery Fund maintain current Worker's Compensation insurance providing compensation under the NYS Workers' Compensation Law for all drivers dispatched.

On or before 2/24/2017 you must provide a current certificate of workers' compensation insurance.

Mail a copy of this directive as well as the current certificate of workers' compensation insurance to:

Taxi and Limousine Commission
Attention: Compliance Unit
31-00 47th Avenue
3rd Floor

Long Island City, NY 11101

Please Note: **Keep proof of mailing for your records.**

Failure to respond to this Directive may result in a summons for a violation of TLC Rules §59B-12(a)(1)(iv) and §59B-13(j)(1), and if found guilty you may be fined up to \$5,200 and your license may be suspended until compliance.

I affirm that on 2/6/2017, I inserted a true copy of this summons into an envelope addressed to the named respondent at the last known mailing address respondent filed with the Commission I placed the envelope in a TLC outgoing mail receptacle for TLC's mail room staff to pick up. In the regular course of business, a member of the TLC mail room staff will deposit TLC outgoing mail into the custody of the United States Postal Service for regular first-class mail delivery within two business days of the date below.

PRINT NAME: Whitehead, Constance SIGNATURE: *Constance Whitehead* DATE: 2/6/2017



New York State Insurance Fund

Workers' Compensation & Disability Benefits Specialists Since 1914

199 CHURCH STREET, NEW YORK, N.Y. 10007-1100

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE (RENEWED)

***** 133119569
ROMANTIQUE DOUBLE DIAMOND INC
1421 86TH STREET
BROOKLYN NY 112283407



Scan to Validate

POLICYHOLDER ROMANTIQUE LIMOUSINE INC 1421 86TH STREET BROOKLYN NY 112283407		CERTIFICATE HOLDER NYC TAXI & LIMOUSINE COMMISSION 32-02 QUEENS BLVD LONG ISLAND CITY NY 11101	
POLICY NUMBER K1189 725-3 ✓	CERTIFICATE NUMBER 104091	POLICY PERIOD 01/31/2017 TO 01/31/2018 ✓	DATE 2/10/2017

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 1189 725-3, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW, AND, WITH RESPECT TO OPERATIONS OUTSIDE OF NEW YORK, TO THE POLICYHOLDER'S REGULAR NEW YORK STATE EMPLOYEES ONLY.

IF YOU WISH TO RECEIVE NOTIFICATIONS REGARDING SAID POLICY, INCLUDING ANY NOTIFICATION OF CANCELLATIONS, OR TO VALIDATE THIS CERTIFICATE, VISIT OUR WEBSITE AT [HTTPS://WWW.NYSIF.COM/CERT/CERTVAL.ASP](https://www.nysif.com/cert/certval.asp). THE NEW YORK STATE INSURANCE FUND IS NOT LIABLE IN THE EVENT OF FAILURE TO GIVE SUCH NOTIFICATIONS.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

NEW YORK STATE INSURANCE FUND

DIRECTOR, INSURANCE FUND UNDERWRITING

VALIDATION NUMBER: 487164163



**Taxi & Limousine
Commission**

Meera Joshi – Commissioner
Gary Weiss – Deputy Commissioner
Licensing and Standards
31-00 47th Ave, 3rd Fl
Long Island City, NY 11101
www.nyc.gov/tlc

DIRECTIVE

Date: 2/6/2018

ROMANTIQUE LIMOUSINE INC.
1421 86 STREET
BROOKLYN, NY, 11228

License Number: B01846

Taxi and Limousine Commission (TLC) Rule §59B-12(a)(1)(iv) requires that all bases that are not members of the Livery Fund maintain current Worker's Compensation insurance providing compensation under the NYS Workers' Compensation Law for all drivers dispatched.

On or before 2/24/2018 you must provide a current certificate of workers' compensation insurance.

Mail a copy of this directive as well as the current certificate of workers' compensation insurance to:

Taxi and Limousine Commission
Attention: Compliance Unit
31-00 47th Avenue
3rd Floor
Long Island City, NY 11101

Please Note: **Keep proof of mailing for your records.**

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I affirm that on 2/6/2018, I inserted a true copy of this summons into an envelope addressed to the named respondent at the last known mailing address respondent filed with the Commission I placed the envelope in a TLC outgoing mail receptacle for TLC's mail room staff to pick up. In the regular course of business, a member of the TLC mail room staff will deposit TLC outgoing mail into the custody of the United States Postal Service for regular first-class mail delivery within two business days of the date below.

PRINT NAME: Graham, Naomi SIGNATURE: *Naomi Graham* DATE: 2/6/2018



New York State Insurance Fund

Workers' Compensation & Disability Benefits Specialists Since 1914

199 CHURCH STREET, NEW YORK, N.Y. 10007-1100

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE (RENEWED)

***** 133119569
ROMANTIQUE DOUBLE DIAMOND INC
1421 86TH STREET
BROOKLYN NY 112283407



SCAN TO VALIDATE
AND SUBSCRIBE

POLICYHOLDER ROMANTIQUE LIMOUSINE INC 1421 86TH STREET BROOKLYN NY 11228		CERTIFICATE HOLDER NYC TAXI & LIMOUSINE COMMISSION 32-02 QUEENS BLVD LONG ISLAND CITY NY 11101	
POLICY NUMBER K1189 725-3	CERTIFICATE NUMBER 246880	POLICY PERIOD 01/31/2018 TO 01/31/2019	DATE 2/8/2018

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 1189 725-3, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW, AND, WITH RESPECT TO OPERATIONS OUTSIDE OF NEW YORK, TO THE POLICYHOLDER'S REGULAR NEW YORK STATE EMPLOYEES ONLY.

IF YOU WISH TO RECEIVE NOTIFICATIONS REGARDING SAID POLICY, INCLUDING ANY NOTIFICATION OF CANCELLATIONS, OR TO VALIDATE THIS CERTIFICATE, VISIT OUR WEBSITE AT [HTTPS://WWW.NYSIF.COM/CERT/CERTVAL.ASP](https://www.nysif.com/cert/certval.asp). THE NEW YORK STATE INSURANCE FUND IS NOT LIABLE IN THE EVENT OF FAILURE TO GIVE SUCH NOTIFICATIONS.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

NEW YORK STATE INSURANCE FUND

DIRECTOR, INSURANCE FUND UNDERWRITING

VALIDATION NUMBER: 387867251



Meera Joshi
Commissioner

Gary Weiss
Deputy Commissioner
Licensing and Standards
31-00 47TH AVENUE, 3RD floor
Long Island City, NY 11101

+1 718 391 5501 tel

April 6, 2016

LIC-NBR: B01846
ROMANTIQUE LIMOUSINE INC..
1421 86 STREET
BROOKLYN NY 11228

Dear Base Owner:

This is a courtesy letter

The Taxi & Limousine Commission was notified about the expired/ cancellation of:

Current Worker's Compensation doesn't reflect the current base name therefore you would need to send me a correct copy reflecting the above base name. Included is a copy of the policy you sent which does not have the correct base name on it.

Presently, your license to operate a Base expires on July 31, 2017 and these documents are a fundamental part in maintaining a properly registered Base. Please provide documentation for your base that reflects active or current coverage.

If you have any questions regarding this matter, please call me at 718.391.5661. Please disregard if you have received a directive prior or post this notification.

Sincerely,

Asia Hill

Asia Hill

Licensing and Standard Division
Taxi & Limousine Commission.



New York State Insurance Fund

Workers' Compensation & Disability Benefits Specialists Since 1914

199 CHURCH STREET, NEW YORK, N.Y. 10007-1100

Phone: (212) 587-5545

301846

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

***** 133119569
ROMANTIQUE DOUBLE DIAMOND INC
1421 86TH STREET
BROOKLYN NY 112283407

POLICYHOLDER ROMANTIQUE LIMOUSINE INC 1421 86TH STREET BROOKLYN NY 11228		CERTIFICATE HOLDER NYC TAXI & LIMOUSINE COMMISSION 32-02 QUEENS BLVD LONG ISLAND CITY NY 11101	
POLICY NUMBER K1189 725-3	CERTIFICATE NUMBER 354848	PERIOD COVERED BY THIS CERTIFICATE 01/31/2016 TO 01/31/2017	DATE 4/9/2016

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 1189 725-3 UNTIL 01/31/2017, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW, AND, WITH RESPECT TO OPERATIONS OUTSIDE OF NEW YORK, TO THE POLICYHOLDER'S REGULAR NEW YORK STATE EMPLOYEES ONLY.

IF SAID POLICY IS CANCELLED, OR CHANGED PRIOR TO 01/31/2017 IN SUCH MANNER AS TO AFFECT THIS CERTIFICATE, 10 DAYS WRITTEN NOTICE OF SUCH CANCELLATION WILL BE GIVEN TO THE CERTIFICATE HOLDER ABOVE. NOTICE BY REGULAR MAIL SO ADDRESSED SHALL BE SUFFICIENT COMPLIANCE WITH THIS PROVISION. THE NEW YORK STATE INSURANCE FUND DOES NOT ASSUME ANY LIABILITY IN THE EVENT OF FAILURE TO GIVE SUCH NOTICE.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

NEW YORK STATE INSURANCE FUND

DIRECTOR, INSURANCE FUND UNDERWRITING

This certificate can be validated on our web site at <https://www.nysif.com/cert/certval.asp> or by calling (888) 875-5790
VALIDATION NUMBER: 835157465



Western Surety Company

CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force Bond No. 16106665 briefly described as NEW YORK CITY FOR-HIRE VEHICLE BASE STATION BOND

for DILEO, JOHN, P ROMANTIQUE LIMOUSINES INC

, as Principal, in the sum of \$ FIVE THOUSAND AND NO/100 Dollars, for the term beginning April 19, 2016, and ending April 19, 2019, subject to all the covenants and conditions of the original bond referred to above.

This continuation is issued upon the express condition that the liability of Western Surety Company under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed the total sum above written.

Dated this 12 day of July, 2016.



WESTERN SURETY COMPANY

By

Paul T. Bruhat, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.



**Taxi & Limousine
Commission**

Meera Joshi – Commissioner
Gary Weiss – Deputy Commissioner
Licensing and Standards
31-00 47th Ave, 3rd Fl
Long Island City, NY 11101
(718) 391-5501 tel

DIRECTIVE

Date: 6/28/2016

ROMANTIQUE LIMOUSINE INC.
1421 86 STREET
BROOKLYN, NY, 11228

License Number: B01846

According to TLC records , the \$5,000 Surety Bond for your Base (License B01846) expired on 4/19/2016 .

Taxi and Limousine Commission (TLC) Rule §59B-04(e) states that your base must have a **current** \$5,000 surety bond.

On or before 7/16/2016 you must provide a current Bond certificate to the TLC.

Mail an original Bond certificate or Bond continuation certificate to:

Taxi and Limousine Commission
Attention: Base Unit
31-00 47th Avenue
3rd Floor
Long Island City, NY 11101

Please Note: **Keep proof of mailing for your records.**

Failure to respond to this Directive may result in a summons for a violation of TLC Rules §59B-04(e) and §59B-13(j)(1), and if found guilty you may be fined up to \$550 and your license may be suspended until compliance.

I affirm that on 6/28/2016, I inserted a true copy of this summons into an envelope addressed to the named respondent at the last known mailing address respondent filed with the Commission I placed the envelope in a TLC outgoing mail receptacle for TLC's mail room staff to pick up. In the regular course of business, a member of the TLC mail room staff will deposit TLC outgoing mail into the custody of the United States Postal Service for regular first-class mail delivery within two business days of the date below.

PRINT NAME: Whitehead, Constance

SIGNATURE: *Constance Whitehead*

DATE: 6/28/2016

Western Surety Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That WESTERN SURETY COMPANY, a corporation organized and existing under the laws of the State of South Dakota, and authorized and licensed to do business in the States of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming, and the United States of America, does hereby make, constitute and appoint

Paul T. Bruffat of Sioux Falls,
State of South Dakota, its regularly elected Vice President,
as Attorney-in-Fact, with full power and authority hereby conferred upon him to sign, execute, acknowledge and deliver for and on its behalf as Surety and as its act and deed, the following bond:

One NEW YORK CITY FOR-HIRE VEHICLE BASE STATION BOND

bond with bond number 16106665

for DILEO, JOHN, P ROMANTIQUE LIMOUSINES INC
as Principal in the penalty amount not to exceed: \$5,000.00

Western Surety Company further certifies that the following is a true and exact copy of Section 7 of the by-laws of Western Surety Company duly adopted and now in force, to-wit:

Section 7. All bonds, policies, undertakings, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys-in-Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile.

In Witness Whereof, the said WESTERN SURETY COMPANY has caused these presents to be executed by its
Vice President with the corporate seal affixed this 12 day of July, 2016.

ATTEST

L. Nelson
L. Nelson, Assistant Secretary

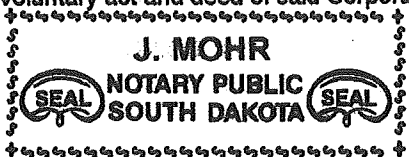
WESTERN SURETY COMPANY
By Paul T. Bruffat
Paul T. Bruffat, Vice President

STATE OF SOUTH DAKOTA
COUNTY OF MINNEHAHA

} ss

On this 12 day of July, 2016, before me, a Notary Public, personally appeared
Paul T. Bruffat and L. Nelson

who, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Vice President
and Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said instrument to be the voluntary act and deed of said Corporation.



My Commission Expires June 23, 2021

J. Mohr

Notary Public

To validate bond authenticity, go to www.cnasurety.com > Owner/Obligee Services > Validate Bond Coverage.



PO Box 5077 Sioux Falls SD 57117-5077

1-800-331-6053
Fax 1-605-335-0357
www.cnasurety.com

June 24, 2016

Agent Code: 31-21530

CITY OF NEW YORK TAXI &
LIMO COMMISSIONS
33 BEAVER ST., 22ND FLOOR
NEW YORK, NY 10004

Re: Bond No. 16106665 Penalty \$5,000
DILEO,JOHN,P ROMANTIQUE LIMOUSINES INC
1421 86TH STREET
BROOKLYN, NY 11228

NEW YORK CITY FOR-HIRE VEHICLE BASE STATION BOND
Company Code: 0601 - WESTERN SURETY COMPANY

We wish to take advantage of the cancellation provision
pertaining to this bond or policy.

You are hereby notified that this bond or policy is cancelled
and voided as of August 05, 2016, or the earliest time permitted
by applicable law, whichever is later.

This bond or policy has been cancelled or nonrenewed because of
nonpayment of premium.

cc: DILEO,JOHN,P ROMANTIQUE LIMOUSINES INC

M & S BROKERAGE
INTERNATIONAL, INC.
6719 FORT HAMILTON PKWY.
BROOKLYN, NY 11219

Underwriting Services



TLC

NEW YORK CITY TAXI & LIMOUSINE COMMISSION

32-02 Queens Blvd., Long Island City, N.Y. 11101 • (718) 391-

DATE: 3/18/04

TO: B. Carter

FROM: A. Medola
BASE UNIT STAFFPERSON

RE: FHV BASE UPDATE

- () ADDITION; ☒ ADDRESS CHANGE, () NAME CHANGE, () OWNER CHANGE
() NEW APPLICATION, () REINSTATEMENT, () SATELLITE BASE
() OTHER _____
- () DELETION; () RE-LICENSED UNDER NEW BASE# (), () NEVER RENEWED
() SHORT VEHICLES, () EXPIRED, () OUT OF BUSINESS
() OUE, () OTHER _____

BASE LICENSE NUMBER: B01846

BASE NAME/ADDRESS: _____

Romanticque Limousine Inc.

1421 86th St.

BROOKLYN, N.Y. 11214

CORPORATE NAME: _____

Romanticque Limousine Inc.

OWNER/OFFICER NAME: _____

John Dileo

COUNCIL/MATIC OFFICE _____

POLICE PRECINCT#: 10

COMMUNITY BOARD#: _____

PHONE#: _____

EXPIRATION DATE: 7/31/04

CORPORATION (C) ☒
PARTNERSHIP (P) _____
SELF PROPRIETOR (S) _____

RECEIVED BY: [Signature]

DATE 3/18/04

AFFIDAVIT OF APPLICANT FOR FOR-HIRE VEHICLE BASE STATION LICENSE

STATE OF New York}

SS:

COUNTY OF NEW YORK}

I, John Dileo AS
OWNER, PARTNER, OFFICER, OR STOCKHOLDER (CIRCLE ONE) OF

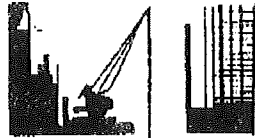
President of Romantic Limousine Inc.
HAVING BEEN DULY SWORN, DEPOSES AND SAYS THAT:

- a) NO VEHICLES WILL BE DISPATCHED FROM SAID FOR-HIRE VEHICLE BASE STATION UNTIL A VALID TLC LICENSE IS ISSUED;
- b) ALL VEHICLES AND DRIVERS WILL BE DISPATCHED FROM SAID FOR-HIRE VEHICLE BASE STATION IN CONFORMANCE WITH ALL APPLICABLE LAWS OF NEW YORK CITY, NEW YORK STATE, AND THE TAXI AND LIMOUSINE COMMISSION;
- c) THE LOCATION USED BY THE FOR-HIRE VEHICLE BASE STATION ON THIS APPLICATION IS NOT USED OR OCCUPIED BY ANY OTHER BASE;
- d) THE ANSWERS TO THE FOREGOING QUESTIONS AND OTHER STATEMENTS CONTAINED THEREIN ARE TRUE TO THE BEST OF HIS/HER KNOWLEDGE; AND THAT HE/SHE UNDERSTANDS THAT:
- e) IF THE FOR-HIRE VEHICLE BASE STATION ON THIS APPLICATION IS FOUND DISPATCHING VEHICLES PRIOR TO RECEIPT OF A LICENSE TO DO SO, THIS APPLICATION WILL BE DENIED AND THE APPLICATION FEE FORFEITED;
- f) IF GRANTED, THE USE AND RETENTION OF THE FOR-HIRE VEHICLE BASE STATION LICENSE IS CONTINGENT UPON THE FOR-HIRE VEHICLE BASE STATION'S FULL AND CONSISTENT SATISFACTION OF ALL THE REQUIREMENTS OF THE TAXI AND LIMOUSINE COMMISSION AS SET FORTH IN THE COMMISSION'S RULES AND REGULATIONS, A COPY OF WHICH I HAVE RECEIVED;
- g) THE MINIMUM OF TEN (10) VEHICLE REQUIREMENT RULE IS MANDATORY FOR A FOR-HIRE VEHICLE BASE STATION LICENSE AND THAT FAILURE TO ADHERE TO THIS RULE MAY RESULT IN SUSPENSION OF THE FOR-HIRE VEHICLE BASE STATION LICENSE; AND
- h) FALSIFICATION OF ANY STATEMENT MADE HEREIN IS A CRIME PUNISHABLE BY A FINE, AND/OR IMPRISONMENT, AND/OR DENIAL OF A FOR-HIRE VEHICLE BASE STATION LICENSE, OR IF GRANTED, REVOCATION OF LICENSE.

SWORN TO BEFORE ME
THIS _____ DAY OF _____ 20____

NOTARY

FOR APPLICANT

**SLR**

SHELDON L. REICH, P.C.
Engineers and Architects

709 PORT RICHMOND AVENUE
STATEN ISLAND, N.Y. 10302
(718) 981-9383 • (718) 981-9124
FAX: (718) 981-9407

February 03, 2004

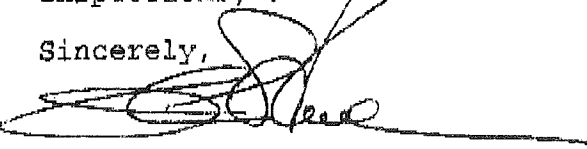
John DeLeo
ROMANTIQUE
1421 86th Street
Brooklyn, NY 11214

Re: New Buildings
DOB #'s 301503148
301665856
301885847

Dear Mr. DeLeo:

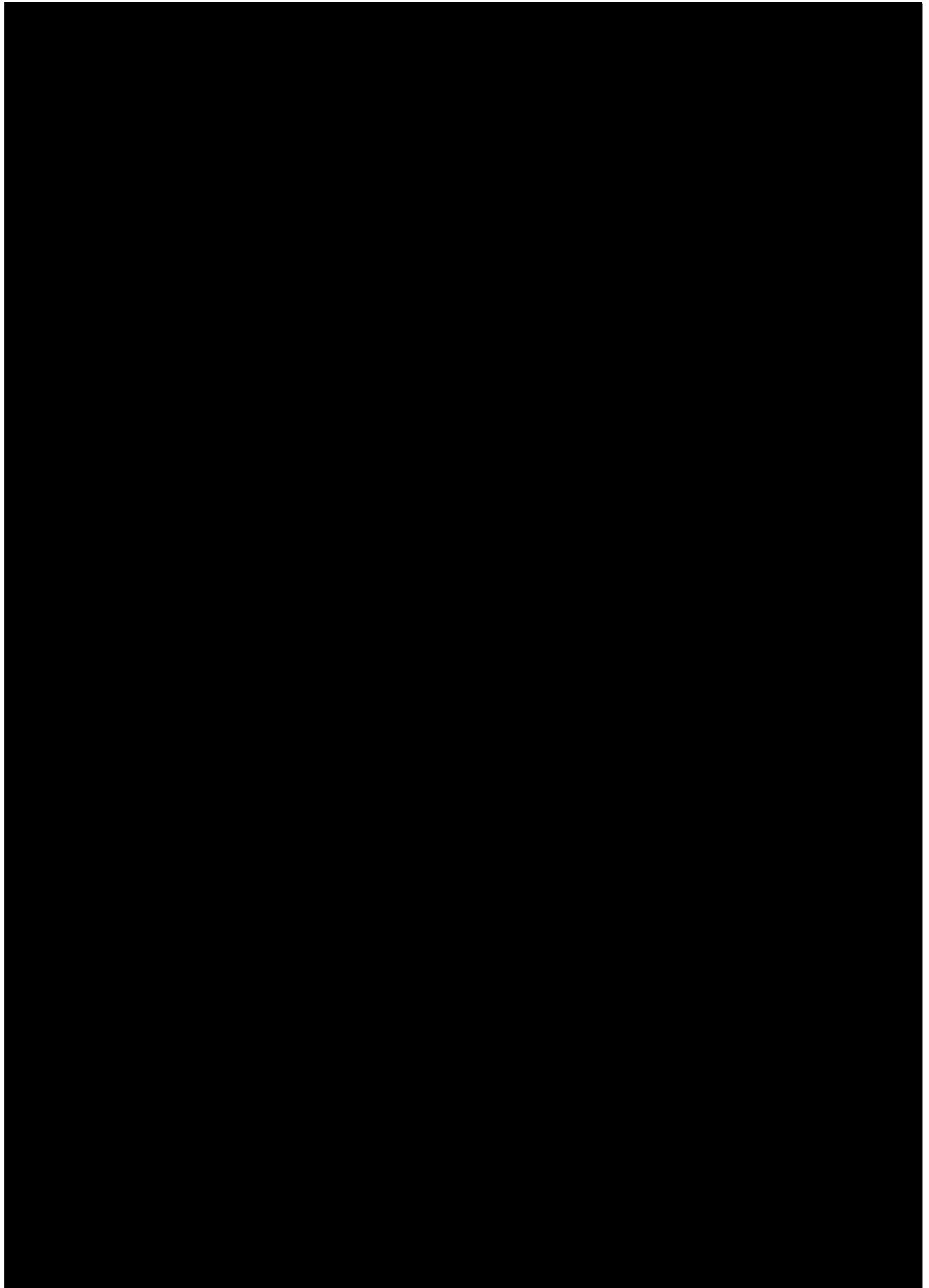
In response to your inquiry, please be advised that we have filed the POST APPROVAL AMENDMENTS (see attached) for each of the applications. These filings represent the as-built conditions. They are currently under Building Department review. Once approved we can proceed to schedule the required inspections, and obtain the Certificates of Occupancy.

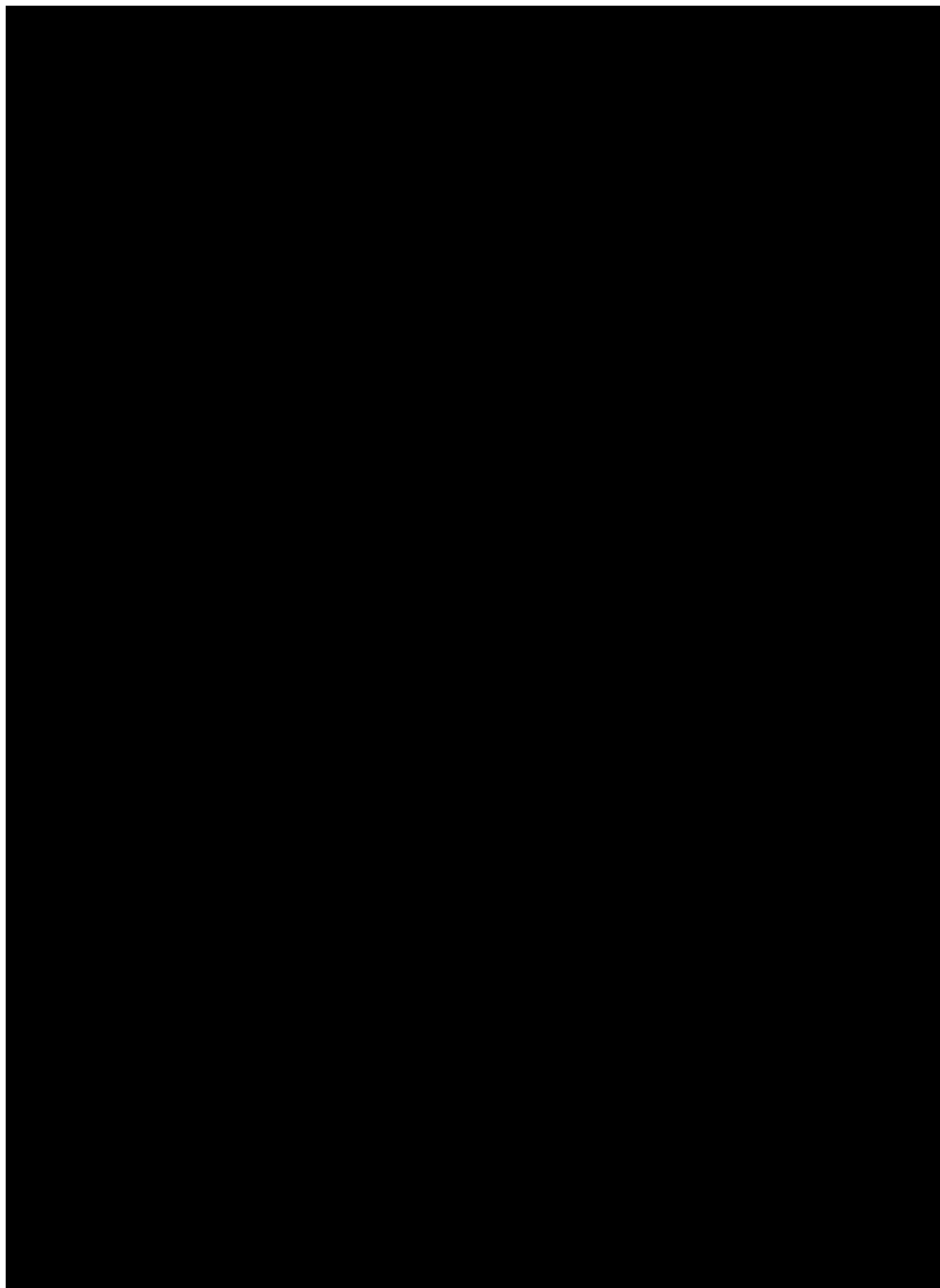
Sincerely,

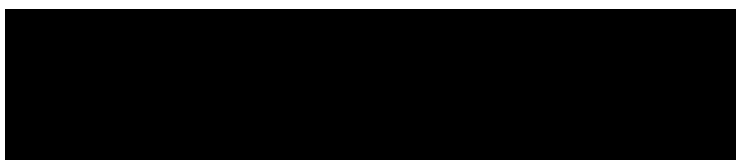
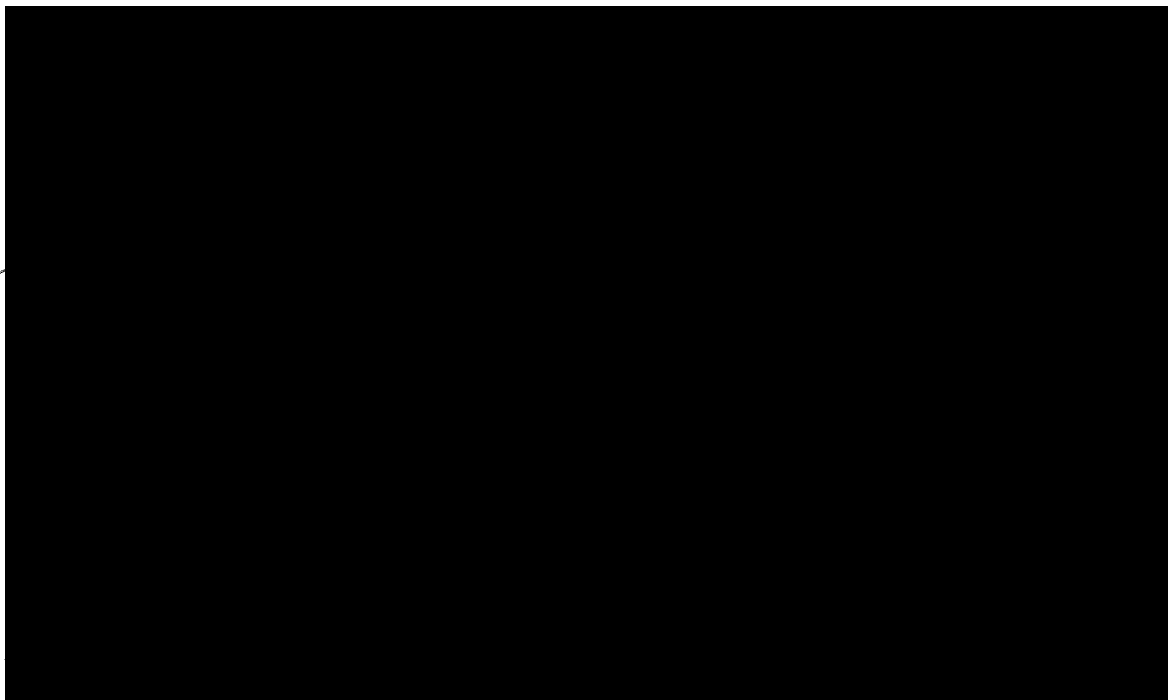

Sheldon L. Reich, P.E.
President

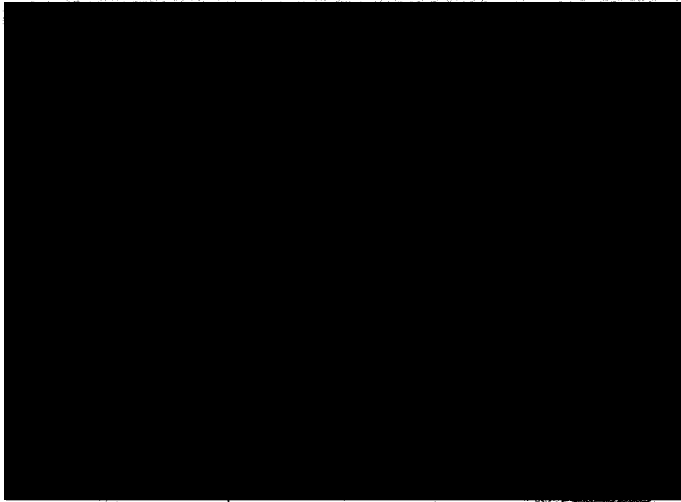
SLR/bdr
attachment











LICENSE NO. B01846
CATEGORY: LX



**NEW YORK CITY
TAXI & LIMOUSINE COMMISSION
FOR-HIRE VEHICLE
BASE LICENSE**

ROMANTIQUE LIMOUSINE INC
1421 86TH STREET
BROOKLYN, NEW YORK 11228

THE ABOVE NAMED BASE HAS DULY BEEN LICENSED BY THE NEW YORK CITY TAXI AND LIMOUSINE
COMMISSION AND IS HEREBY AUTHORIZED TO OPERATE AS A FOR-HIRE VEHICLE BASE IN ACCORDANCE WITH
SECTION 19-511 OF THE ADMINISTRATIVE CODE OF THE CITY OF NEW YORK

March 18, 2004
Date Issued

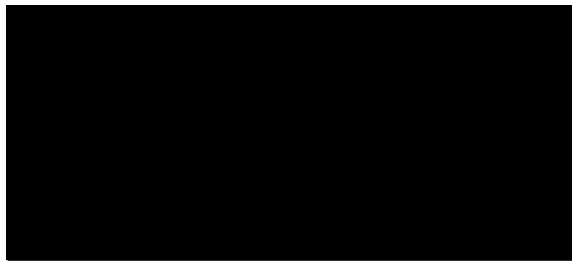
July 31, 2004
Expiration Date

WILLIAM CARTER
EXECUTIVE DIRECTOR
LICENSING DIVISION

THIS ORIGINAL LICENSE BEARING RAISED COMMISSION SEAL MUST BE PROMINENTLY DISPLAYED AND
PRODUCED ON DEMAND TO A COMMISSION REPRESENTATIVE OR OTHER LAW ENFORCEMENT AGENTS. IT MAY
NOT BE USED OR DISPLAYED AT ANY OTHER LOCATION OTHER THAN INDICATED ABOVE.

Rec'd license on 3/18/04

X





LICENSING

32-02 Queens Blvd., Long Island City, NY 11101 - (718) 391-5609



FOR-HIRE /PARA/ VANS-BASE LICENSE RENEWAL APPLICATION

32-02 Queens Blvd., Long Island City, NY 11101

-INSTRUCTIONS-

You are responsible for ensuring that all information on this card is correct. Any changes to the data indicated must be made in person at the Taxi and Limousine Commission. You must also provide the information requested. Complete the information and enclose certified check or money order payable to: Taxi Limousine Commission, date and sign renew form and mail in the enclosed envelope. The amount of the renewal fee is indicated below. Failure to follow the above instructions will delay the processing of your renewal form. Base not filing renewal before the expiration of their current license will result in suspension of license.

1. FOR-HIRE BASE LICENSE NO. B01846

2. BASE NAME AND ADDRESS

ROMANTIQUE LIMOUSINE INC.
6717 11 AVENUE
BROOKLYN NY
11219

3. BASE TELEPHONE NUMBER

718-232-7273

4. SOCIAL SECURITY NO.

OR

FED. EMPLOYER I.D. NO.

RENEWAL FEE: \$1000.00

PLEASE NOTE: The Base License is Non-Transferable.

ATTACH A COPY OF YOUR CURRENT WORKER'S COMPENSATION INSURANCE CERTIFICATE

- OR -

PROVIDE PROOF OF WORKER'S COMPENSATION EXEMPTION

* (Required) 24hr. Phone # Per Section 6-11 (L) (1)

SINCE YOUR LAST LICENSE WAS ISSUED HAS:

There been any change in the name of the licensed Base?

YES _____ NO _____

There been any change in the location of the Licensed Base?

YES _____ NO _____

There been any change in individuals, partners, officers' or the four (4) largest stockholders?

YES _____ NO _____

There been any change in the home address of individuals, officers or the four (4) largest stockholders?

YES _____ NO _____

Any of the individuals, partners, officers or the four (4) largest stockholders been convicted of a crime in any jurisdiction, Federal, State or local?

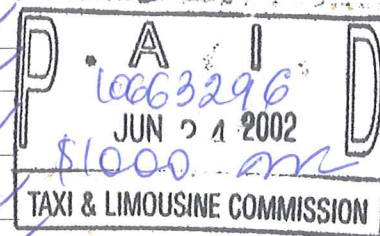
YES _____ NO _____

IF YOU ANSWER "YES" TO ANY OF THE ABOVE QUESTIONS, YOU MUST APPEAR AT THE TAXI AND LIMOUSINE COMMISSION WITH APPROPRIATE DOCUMENTATION.

I SWEAR, OR AFFIRM THAT THE INFORMATION PROVIDED BY ME ON THIS FORM IS TRUE AND CORRECT.

DATE

SIGNATURE



FORM NO. FHBLRA-1.5M-2POO124(96)

CAMIS-ID: 40773503

CONTROL:

15

EXPIRES: July 31, 2004



B01846

NEW YORK STATE DEPARTMENT OF STATE DIVISION OF CORPORATIONS
SEARCH INFORMATION REQUEST

AUGUST 21, 2002

A Certificate of Incorporation of ROMANTIQUE LIMOUSINE INC. was
filed on 03/09/1981. Its principal location is RICHMOND county.

Status: Active

Biennial Statement: Past due - undeliverable

Service of Process Address:
ROMANTIQUE LIMOUSINE INC.
2550 RICHMOND TERRACE
STATEN ISLAND, NY 10303

Registered Agent (optional in NY):
NO ADDRESS STATED

Chief Executive Officer: None listed

Principal Business Location: None listed

Current Stock Information:
Stock Type Num.Shares Par Value/Share
No Par Value 200

B01846

NEW YORK STATE DEPARTMENT OF STATE DIVISION OF CORPORATIONS
SEARCH INFORMATION REQUEST

AUGUST 21, 2002

A Certificate of Incorporation of ROMANTIQUE LIMOUSINE INC. was
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Registered Agent (optional in NY):
NO ADDRESS STATED

Chief Executive Officer: None listed

Principal Business Location: None listed

Current Stock Information:
Stock Type Num.Shares Par Value/Share
No Par Value 200

BUSINESS AUTO DECLARATIONS

POLICY NUMBER: BA148582RENEWAL OF NUMBER: BA144415*1INSURED NUMBER: 65369

LANCER INSURANCE COMPANY
LONG BEACH, NY

1063

ITEM ONENAMED INSURED: ROMANTIQUE LIMOUSINES, INC.

MAILING ADDRESS: 67-13 11TH AVENUE
BROOKLYN, NY 11219

POLICY PERIOD: From 03-01-2002 to 01-31-2003 at
12:01 A.M. Standard Time at your mailing address shown above.

Form of Business: CORPORATION

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

ITEM TWO-SCHEDULE OF COVERAGES AND COVERED AUTOS

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those autos shown as covered autos. Autos are shown as covered autos for a particular coverage by the entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form next to the name of the coverage.

COVERAGES	COVERED AUTOS*	LIMIT: THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS	PREMIUM
LIABILITY	7	\$1,000,000 COMBINED SINGLE LIMIT	\$ 54,319
PERSONAL INJURY PROTECTION (or equivalent No-fault Coverage)	7	Mandatory Basic \$ 50,000 Economic Loss Optional Basic \$ Economic Loss Additional Personal Injury Protection \$ 150,000 Aggregate No-fault Benefits Available \$ 50,000 Maximum Monthly Work Loss Other Necessary Expenses (per day) Death Benefit \$	\$ 10,618
PROPERTY PROTECTION INS. (Michigan only)		SEPARATELY STATED IN THE PPI ENDORSEMENT MINUS \$ DED FOR EACH ACCIDENT	\$
AUTO MEDICAL PAYMENTS		\$	\$
UNINSURED MOTORISTS		\$	\$
SUPPLEMENTARY UNINSURED MOTORISTS	7	\$ 25000/50000 The maximum amount payable under SUM coverage shall be the policy SUM limits reduced and thus offset by motor vehicle bodily injury liability insurance policy or bond payments received from, or on behalf of, any	\$ 662

BUSINESS AUTO DECLARATIONS CONTINUEDPOLICY NUMBER: BA148582INSURED NAME: ROMANTIQUE LIMOUSINES

		negligent party involved in the accident, as specified in the SUM endorsement.	
PHYSICAL DAMAGE: ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS, MINUS DEDUCTIBLE SHOWN BELOW.			
COMPREHENSIVE COVERAGE		\$ DED FOR EACH COVERED AUTO. **	\$
SPECIFIED CAUSES OF LOSS COVERAGE	7	\$ 2,500 DED FOR EACH COVERED AUTO. **	\$ 9,571
COLLISION COVERAGE	7	\$ 2,500 DED FOR EACH COVERED AUTO. **	\$ 14,357
TOWING AND LABOR (not available in Calif.)		\$ FOR EACH DISABLEMENT OF A PRIVATE PASSENGER AUTO.	\$
		PREMIUM FOR ENDORSEMENTS	\$
		PREMIUM FOR ENDORSEMENTS	\$
		ESTIMATED POLICY PREMIUM	\$ 89,527
		NY MV LAW ENFORCEMENT FEE	\$ 31

*Entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form shows which autos are covered autos.

**See ITEM FOUR for hired or borrowed "auto".

Estimated Premium shown is payable: See Attached form GU207(INST)

ENDORSEMENTS ATTACHED TO THIS POLICY:

CA0001(7/97), CA0022(2/99), CA0112(2/01), CA0225(6/99), CA2001(12/90)
 CA2232(2/00), CA2233(2/00), CA2402(12/93), CA3107(11/98), CA3108(11/98)
 CA9928(2/99), CA9944(12/90), GU207AIP(6/78), GU207INST(6/78), IL0017(11/98)
 IL0183(4/98), LIC-AM-1(6/96), LIC-BJP8056-1X-A(9/89), LIC-CRA01(9/85)
 LIC-NY-FEE, LIC-PHYSDAM-LIMO(8/96), LIC-POLL-EX-1, LIC-PUN-DAM-EXCL(10/94)
 REG 68-A NOTICE

COUNTERSIGNED 03-07-2002
 (Date)

BY

Walter J. Pica
 (Authorized Representative)

ITEM THREE-SCHEDULE OF COVERED AUTOS YOU OWN

Cov. Auto No.	DESCRIPTION Year - Trade Name - Model - Serial No (VIN)	PURCHASED		TERRITORY: Town & State where the covered Auto will be principally garaged.
		Original Cost	Actual Cost New Used	
1	1993 LINC 1LNLM81W9PY711948		18,000 (✓)	BROOKLYN, NY 11219
2	1959 BENTLEY B583LFD		10,000 (✓)	BROOKLYN, NY 11219
3	1998 LINC 1LNFM81W3WY627135		30,000 (✓)	BROOKLYN, NY 11219
4	1998 BMW WBAGJ8321WDM16712		35,000 (✓)	BROOKLYN, NY 11219
5	1998 FORD 1FBSS31L7WHA95667		13,000 (✓)	BROOKLYN, NY 11219
6	1998 FORD 1FBSS31L4WHA95674		13,000 (✓)	BROOKLYN, NY 11219
7	1998 LINC 5LMPU28LOWLJ41776		63,000 (✓)	BROOKLYN, NY 11219
8	1998 LINC 5LMPU28LXLJ40103		27,000 (✓)	BROOKLYN, NY 11219
9	1998 LEXUS JT8BH68X9W0003184		67,500 (✓)	BROOKLYN, NY 11219
10	1998 LINC 1LNFM81W2WY719546		25,000 (✓)	BROOKLYN, NY 11219

BUSINESS AUTO DECLARATIONS CONTINUEDPOLICY NUMBER: BA148582INSURED NAME: ROMANTIQUE LIMOUSINES

11	2000 JAG SAJDA01DOYGL06846	72,000 (✓)	BROOKLYN, NY 11219
12	2000 LINC 1L1FM81W9YY759062	42,000 (✓)	BROOKLYN, NY 11219
13	2000 LINC 1L1FM81WXY797478	42,000 (✓)	BROOKLYN, NY 11219
14	2000 LINC 1L1FM81W0YY797487	42,000 (✓)	BROOKLYN, NY 11219
15	2000 LINC 1L1FM81W7YY798734	42,000 (✓)	BROOKLYN, NY 11219
16	2000 LINC 1L1FM81W8YY797480	42,000 (✓)	BROOKLYN, NY 11219
17	2000 LINC 1L1FM81W2YY792128	42,000 (✓)	BROOKLYN, NY 11219
18	1997 HUMMER 137ZA8436VE178285	85,000 (✓)	BROOKLYN, NY 11219
19	2000 CADI 1G6KD54Y5YU346725	23,000 (✓)	BROOKLYN, NY 11219
20	2000 CADI 1G6KD54Y5YU346339	23,000 (✓)	BROOKLYN, NY 11219
21	2000 FORD 1FMSU43F9YEC33972	29,000 (✓)	BROOKLYN, NY 11219
22	2001 MBNZ WDBNG70J71A161328	94,500 (✓)	BROOKLYN, NY 11219
23	2001 FORD 1FMNU43S51EA71628	80,000 (✓)	BROOKLYN, NY 11219
24	2001 CADI 1GEEH90Y71U550452	62,100 (✓)	BROOKLYN, NY 11219
25	2001 CADI 1GEEH90Y91U550453	62,100 (✓)	BROOKLYN, NY 11219
26	2001 LINC 1LNHM81W61Y651429	24,000 (✓)	BROOKLYN, NY 11219
27	2001 LINC 1LNHM81W21Y651430	24,000 (✓)	BROOKLYN, NY 11219
28	2001 LINC 1LNHM81W41Y651431	24,000 (✓)	BROOKLYN, NY 11219
29	2000 FORD 1FMSU43F3YEC18531	29,000 (✓)	BROOKLYN, NY 11219
30	2001 FORD 1FBSS31LX1HA63773	20,000 (✓)	BROOKLYN, NY 11219
31	2002 CADI 1GYEC63T92R129143	95,000 (✓)	BROOKLYN, NY 11219

CLASSIFICATION								
Cov. Auto No.	Radius of Operation (Miles)	Business Use S=Service R=Retail C=Commercial	Size, GVW, GCW or Vehicle Seating Capacity	Age Group	Rating Factor		Secon- dary	Code
					Primary Liab.	Phy. Dam.		
1	100		9-20	6	0.55		0.00	4299
2	100		9-20	6	0.55		0.00	4299
3	100		9-20	5	0.55		0.00	4299
4	100	S		5	1.00		0.00	3A
5	100		9-20	5	0.90		0.00	5299
6	100		9-20	5	0.90		0.00	5299
7	100		9-20	5	0.55		0.00	4299
8	100	S		5	1.00		0.00	3A
9	100		9-20	5	0.55		0.00	4299
10	100		9-20	5	0.55		0.00	4299
11	100		9-20	3	0.55		0.00	4299
12	100		9-20	3	0.55		0.00	4299
13	100		9-20	3	0.55		0.00	4299
14	100		9-20	3	0.55		0.00	4299
15	100		9-20	3	0.55		0.00	4299
16	100		9-20	3	0.55		0.00	4299
17	100		9-20	3	0.55		0.00	4299
18	100		9-20	6	0.55		0.00	4299
19	100		9-20	3	0.55		0.00	4299
20	100		9-20	3	0.55		0.00	4299
21	100		1-8	3	0.55		0.00	4299
22	100		9-20	2	0.55		0.00	4299
23	100		9-20	2	0.55		0.00	4299
24	100		9-20	2	0.55		0.00	4299
25	100		9-20	2	0.55		0.00	4299

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-7690
CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
6717 11TH AVE
BROOKLYN

NY 11219

POLICY NUMBER K 1189 725-3
DATE 9/30/2002
CERTIFICATE NUMBER 465-909

PERIOD COVERED BY THIS CERTIFICATE
1/31/2000 TO 1/31/2003

POLICYHOLDER
ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
6717 11TH AVE
BROOKLYN

NY 11219

CERTIFICATE HOLDER
NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE STATE INSURANCE FUND UNDER POLICY NO. 1189 725-3 UNTIL 1/31/2003, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK.

IF SAID POLICY IS CANCELLED, OR CHANGED PRIOR TO 1/31/2003 IN SUCH MANNER AS TO AFFECT THIS CERTIFICATE, 5 DAYS WRITTEN NOTICE OF SUCH CANCELLATION WILL BE GIVEN TO THE CERTIFICATE HOLDER ABOVE. NOTICE BY REGULAR MAIL SO ADDRESSED SHALL BE SUFFICIENT COMPLIANCE WITH THIS PROVISION.

THE STATE INSURANCE FUND

Vincent M. Trivitt

DIRECTOR, INSURANCE FUND UNDERWRITING

Sep-30-2002 03:54

From-MARSH USA

+1 864 34560

**Facsimile
Transmittal
Sheet**c/o Marsh USA Inc.
30 Fountain Plaza, Suite 290
Buffalo, NY 14202
716 843 4545 Fax: 716 843 4560**NYBCOICF**
"The Black Car WC Fund"

Date: September 30, 2002 Pages, with cover: 4
To: Umilta Gibson Fax: 718-391-5695
Company: NYC TLC
Copy: John DiLeo (fax: 718-234-6137)
From: Bob Bossert
Subject: Romantique Limousine

Umilta,

Please find enclosed a copy of Romantique Limousine's application for membership in the Black Car Fund.

You will note that Mr. DiLeo has answered question #2 as 100% of the cars affiliated with the base are owned by the applicant. That being the case, Romantique's application for membership in the Fund will be rejected by the NYS Department of State.

Therefore, since Romantique Limousine is not eligible to become a member of the Fund - they cannot participate in the workers' compensation program provided by the Fund. They will have to satisfy their workers' compensation coverage requirement in some other fashion.

Please call me with any questions.

Bob

The information contained in this facsimile message is confidential, may be privileged, and is intended for the use of the individual or entity named above. If you, the reader of this message, are not the intended recipient, the agent, or employee responsible for delivering this transmission to the intended recipient, you are expressly prohibited from copying, disseminating, distributing, or in any other way using any of the information contained in this facsimile message.



STATE OF NEW YORK
DEPARTMENT OF STATE
DIVISION OF LICENSING SERVICES
84 HOLLAND AVENUE
ALBANY, NY 12208-3490

RANDY A. DANIELS
SECRETARY OF STATE

SEPT / 24 / 2002

ROMANTIQUE LIMOUSINE

Dear Central Dispatch Facility Applicant:

We are unable to complete the processing of the enclosed application for Central Dispatch Facility registration until the indicated items are complied with:

_____ Remit a fee of \$ _____ made payable to: Department of State or Division of Licensing Services.

_____ The check/application must be signed.

_____ You did not answer question(s) _____

_____ You are not eligible for registration. Your response to question #1 is that less than 90% of your for hire business is on a payment basis other than direct cash payment by a passenger. Section 160-cc (b) requires that **more than 90%** of your for hire business be on a payment basis other than direct cash payment by a passenger.

XXXX You are not eligible for registration. Your response to question #2 is that you own 50% or more of the cars you dispatch. Section 160-cc (b) requires that the percentage of vehicles owned must be less than 50%.

_____ You must provide a certification from the Black Car Fund, Marsh USA Inc., that you are in compliance with its surcharge obligations. Details can be obtained by writing to them at:
Marsh USA Inc., Suite 290, 50 Fountain Plaza, Buffalo, NY 14202 or by phoning them at 716- 843-4545.

_____ Other: _____

Sincerely,

Division of Licensing Services
Processing Unit

CENTRAL DISPATCH FACILITY APPLICATION

NYS DEPARTMENT OF STATE

- If you are applying as a sole proprietor, complete Items 1 and 2, below.
- If you are applying as a corporation, partnership or limited liability company, skip Item 1 and go directly to Item 2, below.

1 Child Support Statement — If you are applying as a sole proprietor, you must complete this section.**2 Applicant Affirmation** — I affirm, under the penalties of perjury, that the statements made in this application are true and correct. I further affirm that I have read and understand the provisions of Article 6F of the Executive Law and the rules and regulations promulgated thereunder.Applicant's Signature: *[Signature]*Date: 9/14/02Applicant's Title: President**COMPLETE FOR CREDIT CARD PAYMENT**Total amount due: \$ 200⁰⁰Applicant Name: ROMANTIC LIMOUSINE INC.Please charge to: [Redacted]Credit Card No: [Redacted]Print cardholder: [Redacted]Cardholder's sig: [Redacted]

A \$20 fee will be charged for any check returned by your bank.
It is important that you notify the Division of Licensing Services of any changes in your business address so you will continue to receive renewal notices and other notifications pertinent to your registration.

Please be sure to include a certification that the company is in compliance with its surcharge obligations to the Fund, and Attachment A and all fees with your application form.

**Central Dispatch Facility Application
Officers and/or Principals****BUSINESS NAME** (ENTER THE APPLICANT'S BUSINESS NAME, EXACTLY AS SHOWN ON APPLICATION FORM)

Please photocopy this page as many times as needed to allow for entry of all primary officers and principals.

LAST NAME	FIRST NAME	MI	SUFFIX
Dileo	JOHN		PATRICK
TITLE: President			
CHECK ONE: <input type="checkbox"/> Officer <input type="checkbox"/> Principal <input checked="" type="checkbox"/> BOTH			
SOCIAL SECURITY NUMBER (SEE INSTRUCTIONS - PRIVACY NOTIFICATION)			
RESIDENCE STREET ADDRESS - A P.O. BOX MAY BE ADDED ONLY TO ENSURE DELIVERY			
APT. NUMBER			
CITY			
STATE			
ZIP + 4			
COUNTY			

LAST NAME	FIRST NAME	MI	SUFFIX
PERSICO	MICHAEL		J
TITLE: V PRES			
CHECK ONE: <input type="checkbox"/> Officer <input type="checkbox"/> Principal <input checked="" type="checkbox"/> BOTH			
SOCIAL SECURITY NUMBER (SEE INSTRUCTIONS - PRIVACY NOTIFICATION)			
RESIDENCE STREET ADDRESS - A P.O. BOX MAY BE ADDED ONLY TO ENSURE DELIVERY			
APT. NUMBER			
CITY			
STATE			
ZIP + 4			
COUNTY			

LAST NAME	FIRST NAME	MI	SUFFIX
TITLE:			
CHECK ONE: <input type="checkbox"/> Officer <input type="checkbox"/> Principal <input type="checkbox"/> BOTH			
SOCIAL SECURITY NUMBER (SEE INSTRUCTIONS - PRIVACY NOTIFICATION)			
RESIDENCE STREET ADDRESS - A P.O. BOX MAY BE ADDED ONLY TO ENSURE DELIVERY			
APT. NUMBER			
CITY			
STATE			
ZIP + 4			
COUNTY			

LAST NAME	FIRST NAME	MI	SUFFIX
TITLE:			
CHECK ONE: <input type="checkbox"/> Officer <input type="checkbox"/> Principal <input type="checkbox"/> BOTH			
SOCIAL SECURITY NUMBER (SEE INSTRUCTIONS - PRIVACY NOTIFICATION)			
RESIDENCE STREET ADDRESS - A P.O. BOX MAY BE ADDED ONLY TO ENSURE DELIVERY			
APT. NUMBER			
CITY			
STATE			
ZIP + 4			
COUNTY			

FOR OFFICE
USE ONLY

UNIQUE ID

CASH NUMBER

FEE

\$200

Central Dispatch Facility Application

PLEASE PRINT OR TYPE

NYS Department of State
DIVISION OF LICENSING SERVICES
84 Holland Avenue
Albany, NY 12208-3480

BUSINESS NAME

BUSINESS ADDRESS

STREET ADDRESS (REQUIRED)

CITY

STATE


ZIP

COUNTY

DAYTIME TELEPHONE NUMBER

FEDERAL ID NUMBER (SEE PARADOX NOTIFICATION)

(718) 232-7273

1. Percentage of for-hire business that is on a payment basis other than direct cash payments by passengers 100%
2. Percentage of for-hire vehicles owned by applicant 100%
3. Number of cars available for dispatch 27
4. Number of operators (registered owners or designated drivers) available for dispatch .. 20
5. Total gross revenues for preceding fiscal year 
6. Name and license number if licensed by a local authority TLC Base # BO1846

7. Names of any wholly-owned subsidiaries, which pick up or discharge passengers in New York State

Application continued on reverse...



**NEW YORK CITY
TAXI & LIMOUSINE
COMMISSION**

32-02 Queens Blvd., Long Island City, N.Y. 11101 (718) 391-5500

August 7, 2002

TLC# B01846

Romantique Limousine Inc
6717 11th Avenue
Brooklyn NY 11219

Dear Base Owner:

Your renewal application cannot be processed until you submit the following document(s):

Black Car Fund membership exemption letter (see attached). ✓

List of all vehicles dispatched by the base station and the declaration page from the automobile liability insurance policy(ies) covering the vehicles listed. Include any "excess limits" insurance policies covering the vehicles, if necessary. ✓

Clearance for outstanding Taxi & Limousine Commission summonses (see attached).

Please call 718-391-5614 or 5609 for an appointment when ready.
You have thirty (30) days from the date of this letter to supply the documentation required. Failure to comply will result in the suspension of your license, or the suspension of the application process leading to the issuance of a license.

Sincerely yours,

Antoinette Jean-Louis
Director Base Licensing

ug



**NEW YORK CITY
TAXI & LIMOUSINE
COMMISSION**

32-02 Queens Blvd., Long Island City, N.Y. 11101 (718) 391-5500

July 10, 2002

TLC# B01846

Romantique Limousine Inc
6717 11th Avenue
Brooklyn NY 11219

Dear Base Owner:

Your renewal application cannot be processed until you submit the following document(s):

List of all vehicles dispatched by the base station and the declaration page from the automobile liability insurance policy(ies) covering the vehicles listed. Include any "excess limits" insurance policies covering the vehicles, if necessary.

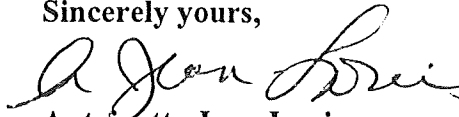
Proof of exemption from membership in the Black Car Fund and current workers' compensation insurance (see attached).

needs workers comp

Clearance for outstanding Taxi & Limousine Commission summonses (see attached).

Please call 718-391-5614 or 5609 for an appointment when ready. You have thirty (30) days from the date of this letter to supply the documentation required. Failure to comply will result in the suspension of your license, or the suspension of the application process leading to the issuance of a license.

Sincerely yours,


Antoinette Jean-Louis
Director Base Licensing

ug

LICENSE NO. B01846
CATEGORY: LX

NEW YORK CITY TAXI & LIMOUSINE COMMISSION



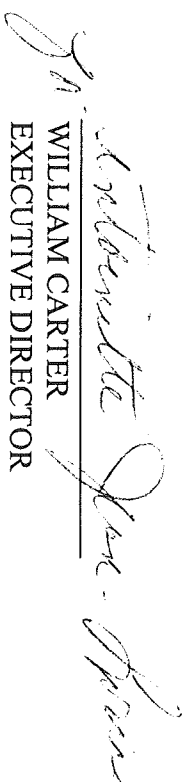
FOR-HIRE VEHICLE BASE LICENSE

ROMANTIQUE LIMOUSINE, INC.
6717 11th AVENUE
BROOKLYN NY 11219

THE ABOVE NAMED BASE HAS DULY BEEN LICENSED BY THE NEW YORK CITY TAXI AND LIMOUSINE COMMISSION AND IS HEREBY AUTHORIZED TO OPERATE AS A FOR-HIRE VEHICLE BASE IN ACCORDANCE WITH SECTION 19-511 OF THE ADMINISTRATIVE CODE OF THE CITY OF NEW YORK

December 6, 2002
Date Issued

July 31, 2004
Expiration Date


WILLIAM CARTER
EXECUTIVE DIRECTOR
LICENSING DIVISION

THIS ORIGINAL LICENSE BEARING RAISED COMMISSION SEAL MUST BE PROMINENTLY DISPLAYED AND PRODUCED ON DEMAND TO A COMMISSION REPRESENTATIVE OR OTHER LAW ENFORCEMENT AGENTS. IT MAY NOT BE USED OR DISPLAYED AT ANY OTHER LOCATION OTHER THAN INDICATED ABOVE.

Mailed 12/06/02

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-7690

CANCELLATION OF CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 11/15/2002
CERTIFICATE NUMBER 465-909

PERIOD COVERED BY THIS CERTIFICATE
1/31/2000 TO 12/06/2002

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
6717 11TH AVE
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

THIS IS TO ADVISE THAT THE WORKERS' COMPENSATION POLICY ISSUED TO THE POLICYHOLDER NAMED ABOVE HAS BEEN CANCELLED EFFECTIVE 12/06/2002.

THIS INFORMATION IS FURNISHED YOU IN COMPLIANCE WITH TERMS OF THE CERTIFICATE OF INSURANCE NUMBERED AS ABOVE AND ANY OTHER CERTIFICATE OF INSURANCE PREVIOUSLY ISSUED TO YOU AT THE POLICYHOLDER'S REQUEST UNDER THE ABOVE POLICY NUMBER.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

CANCELLATION

U-26.3

THE STATE INSURANCE FUND

Vincent M. Tranter

DIRECTOR, INSURANCE FUND UNDERWRITING

BO1846

NEW YORK STATE DEPARTMENT OF STATE DIVISION OF CORPORATIONS
SEARCH INFORMATION REQUEST

JUNE 21, 2000

A Certificate of Incorporation of ROMANTIQUE LIMOUSINE INC. was filed on 03/09/1981. Its principal location is RICHMOND county.

Status: Active

Biennial Statement: Past due - undeliverable

Service of Process Address:
ROMANTIQUE LIMOUSINE INC.
2550 RICHMOND TERRACE
STATEN ISLAND, NY 10303

Registered Agent (optional in NY):
NO ADDRESS STATED

Chief Executive Officer: None listed

Principal Business Location: None listed

Current Stock Information:

Stock Type	Num.Shares	Value/Share
Non Par Value	200	.0000000

LICENSE NO. B01846
CATEGORY: LX

2118 073364



NEW YORK CITY TAXI & LIMOUSINE COMMISSION

FOR-HIRE VEHICLE BASE LICENSE

ROMANTIQUE LIMOUSINE INC.
6717 11TH AVENUE
BROOKLYN, NEW YORK 11219

THE ABOVE NAMED BASE HAS DULY BEEN LICENSED BY THE NEW YORK CITY TAXI AND LIMOUSINE
COMMISSION AND IS HEREBY AUTHORIZED TO OPERATE AS A FOR-HIRE VEHICLE BASE IN ACCORDANCE WITH
SECTION 19-511 OF THE ADMINISTRATIVE CODE OF THE CITY OF NEW YORK

September 11, 2000
Date Issued

July 31, 2002
Expiration Date


PETER V. TUMMINELLI
EXECUTIVE DIRECTOR
LICENSING DIVISION

THIS ORIGINAL LICENSE BEARING RAISED COMMISSION SEAL MUST BE PROMINENTLY DISPLAYED AND
PRODUCED ON DEMAND TO A COMMISSION REPRESENTATIVE OR OTHER LAW ENFORCEMENT AGENTS. IT MAY
NOT BE USED OR DISPLAYED AT ANY OTHER LOCATION OTHER THAN INDICATED ABOVE.



lt 7/02 ok
N.C. 7 of 7 clear

LICENSING

32-02 QUEENS BOULEVARD, 2ND FL.
LONG ISLAND CITY, NEW YORK 11101

(718) 391-5500

FOR-HIRE BASE LICENSE RENEWAL APPLICATION

32-02 QUEENS BOULEVARD, 2ND FL.
LONG ISLAND CITY, NEW YORK 11101



-INSTRUCTIONS-

You are responsible for ensuring that all information on this card is correct. Any changes to the data indicated must be made in person at the Taxi and Limousine Commission. You must also provide the information requested. Complete the information and enclose certified check or money order payable to: Taxi Limousine Commission, date and sign renewal form and mail in the enclosed envelope. The amount of the renewal fee is indicated below. Failure to follow the above instructions will delay the processing of your renewal form. Base not filing renewal before the expiration of their current license will result in suspension of license.

1. FOR-HIRE BASE LICENSE NO. B01846

3. BASE TELEPHONE NUMBER 718-232-7273

2. BASE NAME AND ADDRESS

ROMANTIQUE LIMOUSINE INC.
6717 11 AVENUE
BROOKLYN NY
11219

4. SOCIAL SECURITY NO.

OR

FED. EMPLOYER I.D. NO. [REDACTED]

RENEWAL FEE: \$1000.00

PLEASE NOTE: The Base License is Non-Transferable.

ATTACH A COPY OF YOUR CURRENT WORKER'S COMPENSATION INSURANCE CERTIFICATE
OR PROVIDE PROOF OF WORKER'S COMPENSATION EXEMPTION

(REQUIRED) 24-HR. PHONE# PER SECTION 6-11(L)(1): (718) 232-7273

SINCE YOUR LAST LICENSE WAS ISSUED HAS:

There been any change in the name of the licensed Base?

YES _____ NO ☒

There been any change in the location of the Licensed Base?

YES _____ NO ☒

There been any change in individuals, partners, officers' or the four (4) largest stockholders?

YES _____ NO ☒

There been any change in the home address of individuals, officers or the four (4) largest stockholders?

YES _____ NO ☒

Any of the individuals, partners, officers or the four (4) largest stockholders been convicted of a crime in any jurisdiction, Federal, State or local?

YES _____ NO ☒

IF YOU ANSWER "YES" TO ANY OF THE ABOVE QUESTIONS, YOU MUST APPEAR AT THE TAXI AND LIMOUSINE COMMISSION WITH APPROPRIATE DOCUMENTATION.

I SWEAR, OR AFFIRM THAT THE INFORMATION PROVIDED BY ME ON THIS FORM IS TRUE AND CORRECT.

7/11/00
DATE

[Signature]
SIGNATURE

FORM NO. TLC-FHB-5M 9P00245(99).

CAMIS-ID: 40773503

CONTROL:

8

EXPIRES: July 31, 2002

STATE OF NEW YORK - WORKERS' COMPENSATION BOARD
ESTADO DE NUEVA YORK - JUNTA DE COMPENSACION OBRERA

NOTICE OF COMPLIANCE
WORKERS' COMPENSATION LAW
TO EMPLOYEES

IMPORTANT INFORMATION FOR EMPLOYEES WHO
ARE INJURED OR SUFFER AN OCCUPATIONAL
DISEASE WHILE WORKING.

1. By posting this notice and information concerning your rights as an injured worker, your employer is in compliance with the Workers' Compensation Law.
2. If you do not notify your employer within 30 days of the date of your injury your claim may be disallowed, so do so immediately.
3. You are entitled to obtain any necessary medical treatment and should do so immediately.
4. You may choose any doctor, podiatrist, chiropractor or psychologist referred by a medical doctor that accepts NY State Workers' Compensation patients and is Board authorized. However, if your employer is participating in the Managed Care Pilot Program or is involved in a certified preferred provider organization you must first be treated by a provider chosen by your employer and your employer must give you a written statement of your rights concerning further medical care.
5. You should tell your doctor to file copies of medical reports concerning your claim with the Workers' Compensation Board and with your employer's insurance company, which is indicated at the bottom of this form.
6. You may be entitled to lost time benefits if your work-related injury keeps you from work for more than seven days, compels you to work at lower wages or results in permanent disability to any part of your body. You may be entitled to rehabilitation services if you need help returning to work.
7. You should not pay any medical providers directly. They should send their bills to your employer's insurance carrier. If there is a dispute, the provider must wait until the Board makes a decision before it attempts to collect payment from you. If you do not pursue your claim or the Board rules that your injury is not work-related, you may be responsible for the payment of the bills.
8. You are entitled to be represented by an attorney or licensed representative, but it is not required. If you do hire a representative do not pay him/her directly. Any fee will be set by the Board and will be deducted from your award.
9. If you have difficulty in obtaining a claim form or need help in filling it out, or if you have any other questions or problems about a job-related injury, contact any office of the Workers' Compensation Board.

WORKERS' COMPENSATION BOARD OFFICES

Albany, 12241 - 100 Broadway - Menands - (518) 474-6674
Binghamton, 13901-State Office Bldg.- 44 Hawley St.-(607) 721-8356
Buffalo, 14203 - State Office Bldg. - 125 Main St. - (716) 847-3158
Hempstead, 11550 - 175 Fulton Avenue - (516) 560-7700
New York City, 11248 - 180 Livingston St. - Brooklyn - (718) 802-6600
Rochester, 14614 - 130 Main Street West - (716) 238-8300
Syracuse, 13202-State Office Bldg.- 333 East Washington St.-(315) 428-4464

AVISO DE CUMPLIMIENTO
LEY DE COMPENSACION OBRERA
A EMPLEADOS

INFORMACION IMPORTANTE PARA EMPLEADOS QUE
SEAN LESIONADOS O SUFRAN UNA ENFERMEDAD
OCCUPACIONAL MIENTRAS TRABAJAN.

1. Su patrono está cumpliendo la Ley de Compensación Obrera cuando despliega este comunicado concerniente a sus derechos como trabajador lesionado.
2. Si usted no notifica a su patrono dentro del término de 30 días de haber sufrido su lesión su reclamación podría ser desestimada, por eso notifique inmediatamente.
3. Usted tiene derecho a recibir cualquier tratamiento médico necesario relacionado con su lesión y debe gestionarlo inmediatamente.
4. Para el tratamiento de cualquier lesión o enfermedad relacionada con el trabajo, usted puede escoger cualquier medico, podiatra, quiropractico o psicologo (si es referido por un medico autorizado) que esté autorizado y acepte pacientes de la Junta de Compensacion Obrera. Sin embargo, si su patrono está autorizado a participar en el Programa Piloto de Gerencia de Salud o participa en una organizacion certificada de proveedores preferidos (PPO), usted deberá obtener tratamiento inicial para cualquier lesión o enfermedad relacionada con el trabajo de la correspondiente entidad. Patronos que participen en cualquiera de estos programas establecidos por ley están obligados a proveer a sus empleados notificación escrita explicando sus derechos y obligaciones bajo el programa a que esté acogido.
5. Usted deberá requerir de su Médico que radique copias de los informes médicos de su caso en la Junta de Compensación Obrera y en la compañía de seguros de su patrono, que se indica al final de esta forma.
6. Usted tiene derecho a una compensación si su lesión relacionada con el trabajo le impide trabajar por más de siete días, le obliga a trabajar a sueldo más bajo o resulta en incapacidad permanente de cualquier parte de su cuerpo. Usted puede tener derecho a servicios de rehabilitación si necesita ayuda para regresar al trabajo.
7. No pague a ningún proveedor médico directamente por tratamiento de su lesión o enfermedad relacionada con el trabajo. Ellos deben enviar sus facturas al asegurador de su patrono. Si el caso es cuestionado, el proveedor deberá esperar hasta que la Junta decida el caso, antes de iniciar gestión de cobro alguna contra usted. Si usted no tramita su caso a la Junta falia que su lesión o enfermedad no está relacionada con el trabajo, usted podría ser responsable del pago de las facturas.
8. No es obligatorio el estar representado en ninguno de los procedimientos de la Junta, pero es un derecho que usted tiene, el estar representado por abogado o por representante licenciado si usted así lo desea. Si es representado, no pague al abogado o al representante licenciado. Cuando la Junta decida su caso, los honorarios serán determinados por la Junta y descontados de sus beneficios.
9. Si tiene dificultad en conseguir un formulario de reclamación o necesita ayuda para llenarlo o tiene dudas sobre cualquier situación relacionada con una lesión o enfermedad comuníquese con la oficina mas cercana de la Junta.

Robert R. Snashall

ROBERT R. SNASHALL
Chairman (Presidente)

Workers' Compensation Benefits, when due, will be paid by (Los beneficios de Compensación Obrera, cuando debidos, serán pagados por):

THE STATE INSURANCE FUND
199 Church Street, New York, N. Y. 10007
(212) 312-9000

Effective From 1/31/2000 To cancellation
(En Vigor Desde) (Hasta cancellation)

Policy No. C 1189 725-3
(Poliza No.)

Name of employer (Nombre de patrono)
ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
6717 11TH AVE
BROOKLYN NY 11219

By THE WORKERS' COMPENSATION BOARD EMPLOYS AND
SERVES PEOPLE WITH DISABILITIES WITHOUT DISCRIMINATION.

THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND
ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.

C-105 (1-98)

S. I. F. U-30
"03051F/SN"

PRESCRIBED BY CHAIR
WORKERS' COMPENSATION BOARD
STATE OF NEW YORK

LA JUNTA DE COMPENSACION OBRERA EMPLEA Y
SERVE A PERSONAS CON IMPEDIMENTOS SIN DISCRIMINAR.

JXB156 PF3/PF12 (GENERAL FUNCTIONS MENU) PF10 (NEXT SUMMONS NBR)
CN20 CITY-AGENCIES-MANAGEMENT-INFORMATION-SYSTEM 07/14/0
2238 SUMMONS/CITATION-DISPLAY-SCREEN 15:12:3

SUMMONS-NO : 302245C SUMMONS-TYPE: TL REFERENCE: (EG. LD6)
LICENSE-NBR1: B01846 CAMIS-ID: 40773503
: BAS ROMANTIQUE LIMOUSINE INC. 6717 11 AVENUE BROOKLYN 1121
LICENSE-NBR2: CAMIS-ID:
: SOC: DMV:
ISSUE-DATE: 20000419 OFFENSE-DATE: 20000306 TIME: :
PLACE OF OCCURANCE PCT: 000 PLACE-OF-OFFENSE: 40 RECTOR STREET
COMPLAINANT INFO I.D.#: 9999999 NAME: ALMA V. JOHNSON SHIELD#: 99999
HEARING INFO DSP-NO: CA 10371 DATE: 20000516 TIME: : PLACE: M
HEARING-OFFICER: 269 FIORAMONTI, FRANK TAPE: 1A:

PAYMENT-INFO FINE-AMT: 200.00 TOTAL-PAID: 200.00 AMT-DUE:
LAST-PAYMENT-INFO DATE: 20000516 AMOUNT-PAID: 200.00 REC-NO: 1028819420

RULE	DSP	PNT	\$AMT	RULE	DSP	PNT	\$AMT	RULE	DSP	PNT	\$AMT
1 6-18G	CGH	2	2				3				
4			5				6				

Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12-
RETRN < > NEXT RETRN

Complaint
Summons
Summons

Tome
ok to
use
ly
Please take
of needs per
Cof O for

THE CITY OF
NEW YORK

DEPARTMENT OF BUILDINGS

Department of Buildings

Executive Offices

60 Hudson Street, New York, N.Y. 10013

BOROUGH OFFICES

MANHATTAN
60 HUDSON ST. 5TH FLOOR
NEW YORK, N.Y. 10013

BRONX
1932 ARTHUR AVENUE
BRONX, N.Y. 10457

BROOKLYN
MUNICIPAL BUILDING
BROOKLYN, N.Y. 11201

QUEENS
126-06 QUEENS BLVD.
KEW GARDENS, N.Y. 11415

STATEN ISLAND
BOROUGH HALL
ST. GEORGE, N.Y. 10301

STATE OF NEW YORK }
COUNTY OF KINGS }

This is to certify that this is a true copy of a record in the custody of the Department of Buildings of the City of New York.

7/27/00
Date

J. Banks
Certifying Officer

DATE:

BLOCK:

LOT:

PREMISES: 6717 11th Ave.

BOROUGH:

BROOKLYN, NY

Dear Sir/Madam:

A search of our records indicates that:

Alteration

☒ Application # 70 of 1990 was approved on 4-26-1990

Construction work was completed on Pending - Certificate of Occupancy

No Certificate of Occupancy was issued. This Department considers the use of the premises to be established as: use Groups 8, 6, and 2; Automobile Rental

☐ Establishment, Accessory office, and Two families.
No application on file for the above premises. However, in the absence of any evidence to the contrary and based on the documents submitted, the Department of Buildings will not object to the use of the building as:

☐ ~~No application on file. The Department is unable to establish the uses of the above premises at this time.~~

It is the policy of this Department that for all plans and uses approved prior to January 1, 1938 the Department of Buildings did not and does not require a Certificate of Occupancy. (Memo December 13, 1979)

If the building hereafter altered or its use changes, an application for such alteration work or change of use must be filed and a certificate of Occupancy shall be issued pursuant to article 22 of Sub-chapter 1 of the administrative Code of the City of New York.

References:

Building Department
Records

Very truly yours,

Brian S. Gibbs P.E.
Borough Commissioner/Superintendent

Fee: \$ 100

Bin # 3336313

R.

Vehicles Affiliated with a FHV Base

2/1/11

Base Lic #

Base Exp. Date

Base Name

D/B/A

B01846

7/31/2010

ROMANTIQUE LIMOUSINE INC.

Vehicle Lic #

Veh Exp Date

Vehicle Owner

Vehicle Status

DMV Plate

DMV VIN

5152895

9/11/2011

ROMANTIQUE LIMOUSINE INC

002

T457896C

1F1FK15568LA60592

C33384

3/25/2011

ROMANTIQUE LIMOUSINES INC

002

T430147C

1GEEK90Y08U550207

C33398

3/26/2011

ROMANTIQUE LIMOUSINES INC

002

T430085C

1GEEH96Y27U550066

C33399

3/21/2012

ROMANTIQUE LIMOUSINES INC

002

T430079C

1L1FM88W87Y639029

C33400

3/27/2011

ROMANTIQUE LIMOUSINES INC

002

T430093C

1L1FM88W87Y639033

C11402

8/31/2010

ROMANTIQUE LIMOUSINE INC

002

T430047C

1LNHM84W85Y658237

C11404

8/31/2010

ROMANTIQUE LIMOUSINE INC

002

T443455C

1LNHM84W25Y627114

C11583

8/31/2011

ROMANTIQUE LIMOUSINE INC

002

T441002C

1LNHM84WXS7Y665951

C33385

3/19/2012

ROMANTIQUE LIMOUSINES INC

002

T430138C

1GEEK90Y39U550168

5090840

8/8/2011

ROMANTIQUE LIMOUSINE INC

002

T464320C

3GNFK16285G171797

5350441

12/11/2011

ROMANTIQUE LIMOUSINES INC

002

T523871C

SCA1S68474UX07479

5235698

8/2/2010

ROMANTIQUE LIMOUSINE INC

002

T483468C

WMIE8

5272381

8/30/2011

ROMANTIQUE LIMOUSINE INC

002

T499306C

1LNHM84WXS7Y608498

Vehicles Affiliated with a FHV Base

5276603	10/16/2011	ROMANTIQUE LIMOUSINE, INC	002	T498140C	497513302
5276611	10/16/2011	ROMANTIQUE LIMOUSINE INC	002	T498141C	BS83LFD
5284956	1/15/2012	ROMANTIQUE LIMOUSINE, INC	009	T498282C	1GEEK90Y18U550085
5284958	1/15/2012	ROMANTIQUE LIMOUSINE INC	002	T498281C	1GEEK90Y38U550069
5314128	11/20/2010	ROMANTIQUE LIMOUSINE, INC	002	T514057C	1F1FK15588LA60593
5350437	2/4/2012	ROMANTIQUE LIMOUSINES INC	002	T523987C	DLWZ6
C28967	9/23/2011	ROMANTIQUE LIMOUSINES INC	002	T487238C	1F1FK155X8LA79436

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To
ROMANTIQUE LIMOUSINE, INC.
Street, Apt. No.,
or PO Box No. 1421 86th STREET
City, State, ZIP+4 BROOKLYN N.Y. 11228

PS Form 3800, January 2001

See Reverse for Instructions

7001 2510 0001 6744 4444



**Taxi & Limousine
Commission**

David Yassky, Commissioner/Chair

Licensing and Standards Division
32-02 Queens Boulevard, 2nd Floor
Long Island City, New York 11101-2324
Tel: 212.227.6324, www.nyc.gov/tlc

June 16, 2010

TLC# B01846 LX

Romantique Limousine Inc
1421 86th Street
Brooklyn NY 11228

Dear Base Owner:

Your renewal application cannot be processed until you submit the following document(s):

Workers' compensation Insurance certificate naming Taxi & Limousine Commission as certificate holder.

Completed payment form.

Clearance Letter from NYC Department of Buildings.

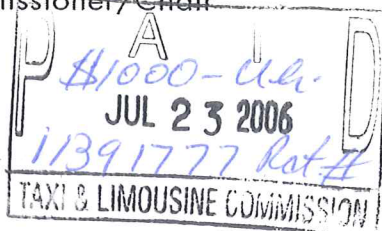
Certificate of Occupancy stamped & dated.

You have until July 31, 2010 to provide the required documents. Failure to comply will result in the DENIAL of your license. If you have any questions regarding this matter please contact Umilta Gibson at 717-391-5614.

Sincerely yours,

Angelique Meola
Supervisor
Business Unit
Licensing & Standards Division

Matthew W. Daus, Commissioner/Chair



May 17, 2006

B01846 LUXURY/LIMOUSINE
ROMANTIQUE LIMOUSINE INC.
1421 86 STREET
BROOKLYN, NY 11228

Community Board: 10
City Council: 43
Police Precinct: 068

BASE LICENSE RENEWAL PAYMENT FORM (FOR-HIRE/PARA)

INSTRUCTIONS: You are responsible for ensuring that all data on this application is correct, as well as to provide all information requested. Any changes to the pre-printed data must be made in person at the NYC TAXI & LIMOUSINE COMMISSION. After completion, date and sign the renewal form. The amount of the renewal fee for two (2) years is One Thousand (\$1,000) Dollars. Failure to follow the above instructions will delay the processing of your renewal application. PLEASE NOTE: The Base License is Non-Transferable unless approved by the Commission.

BASE TELE No.: (718) 232-7273 24hr. No. () - [See TLC Rules 6-11(L)(1)]
SOCIAL SECURITY OR FEDERAL E.I.N. No. [REDACTED]
E-MAIL ADDRESS: J.DILEO2591@AOL.COM

SINCE YOUR LAST LICENSE WAS ISSUED:

- Has there been any change in the name of the license base? No ☒ Yes ☐
- Has there been any change in the location of the license base? No ☒ Yes ☐
- Has there been any change in individuals, partners, officers or stockholders owning more than 10% of the outstanding stock (if a corporation)? No ☒ Yes ☐
- Has there been any change in the residence of individuals, partners, officers or stockholders owning more than 10% of the outstanding stock (if a corporation)? No ☒ Yes ☐
- Have any of the individuals, partners, officers or stockholders owning more than 10% of the outstanding stock (if a corporation) been convicted of a crime in any jurisdiction, Federal, State or Local? No ☒ Yes ☐

IF YOU ANSWER "YES" TO ANY OF THE ABOVE QUESTIONS, YOU MUST APPEAR IN PERSON AT THE NYC TAXI AND LIMOUSINE COMMISSION WITH APPROPRIATE DOCUMENTATION.

STATE OF NEW YORK }
 } SS:
COUNTY OF NEW YORK }

I, the undersigned being duly sworn, deposes and says under the penalty of perjury:

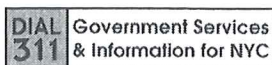
I am the President of the applicant, Romantique Limousine Inc

I have read the foregoing application and know the contents thereof based upon my personal knowledge, or where stated, upon information and belief. The same is true and accurate to my own knowledge.

Sworn to before me this 24th
day of July 2006

John Dileo
PRINT NAME:
TITLE: President

(NOTARY PUBLIC)
WILLIAM R SANTO
Notary public, State of New York
No. 24-4886262
Qualified in Kings County
Commission Expires, February 9, 2007



www.nyc.gov/taxi



NEW YORK CITY
TAXI & LIMOUSINE
COMMISSION

Licensing and Adjudications Bureau
32-02 Queens Boulevard, 2nd Floor
Long Island City, New York 11101-2324
Tel: 212.227.6324, Fax: 212.676.1206

Matthew W. Daus, Commissioner/Chair

AFFIDAVIT

STATE OF NEW YORK)
) ss.:
COUNTY OF NEW YORK)

John Dilco, being duly sworn deposes and says:

I am the President of ROMANTIQUE LIMOUSINE INC

This affidavit is submitted in conjunction with the application of
ROMANTIQUE LIMOUSINE INC. for a TLC license to operate a Base
within the City of New York under the name of ROMANTIQUE LIMOUSINE INC.

Upon information and belief, no fines, levies or other funds are due and owing to
the NYC Criminal Courts by either myself or ROMANTIQUE LIMOUSINE INC.

In the event it is determined that funds are due and owing by either myself
individually or ROMANTIQUE LIMOUSINE INC., I promise I shall remit such funds to the
Criminal Court within one (1) week after demand for same and promptly thereafter
submit written evidence of such satisfaction to the Commission.

It is understood and acknowledged that the license issued to me individually
and/or that issued to the Base will be subject to suspension and/or revocation in the event
any such funds are not paid as stated above.

Sign Name: _____
Print Name: _____
Individually, and as
of

Sworn to before me this 24
day of July, 2006

WILLIAM R SANTO
Notary public, State of New York
No. 24-4886262
Qualified in Kings County 2007
Commission Expired, February 9, _____



New York State Insurance Fund

Workers' Compensation & Disability Benefits Specialists Since 1914

199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
Phone: (212) 587-5546

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER	CERTIFICATE NUMBER	PERIOD COVERED BY THIS CERTIFICATE	DATE
K 1189 725-3	977362	01/31/2004 TO 01/31/2007	7/24/2006

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 1189 725-3 UNTIL 01/31/2007, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW.

IF SAID POLICY IS CANCELLED, OR CHANGED PRIOR TO 01/31/2007 IN SUCH MANNER AS TO AFFECT THIS CERTIFICATE, 10 DAYS WRITTEN NOTICE OF SUCH CANCELLATION WILL BE GIVEN TO THE CERTIFICATE HOLDER ABOVE. NOTICE BY REGULAR MAIL SO ADDRESSED SHALL BE SUFFICIENT COMPLIANCE WITH THIS PROVISION.

THIS CERTIFICATE DOES NOT APPLY TO BUILDING DEMOLITION.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

NEW YORK STATE INSURANCE FUND

DIRECTOR, INSURANCE FUND UNDERWRITING

This certificate can be validated on our web site at <https://www.nysif.com/cert/certval.asp> or by calling (888) 875-5790

U-26.3 VALIDATION NUMBER: 264049673

Matthew W. Daus, Commissioner/Chair

May 17, 2006

B01846
ROMANTIQUE LIMOUSINE INC.
1421 86 STREET
BROOKLYN, NY 11228

Dear Luxury/Limousine Base Owner:

TLC records show that it is time to renew your base license, which expires on July 31, 2006. For your convenience we have attached an application, along with detailed instructions. Please read the instructions carefully and be sure to follow them fully.

It is most important to note that your base must pay its renewal fee and submit a complete renewal application no later than the base license expiration date, July 31, 2006. A complete renewal application is defined as:

- 1: The Base License Payment Form – filled out and notarized
- 2: Renewal payment fee of \$1,000 (US postal money order only)
- 3: Proof of Workers Compensation Insurance (if the base owns more than 50% of its vehicles) OR proof of membership in the Black Car Fund (if the base owns 50% or less of its vehicles)
- 4: The TLC-generated Criminal Court affidavit -- filled out and notarized for all Corporate Officers (Note: If there is more than one officer, please make a photocopy of the document which each officer must fill out and have notarized, accordingly)

If the TLC is not in receipt of payment and a complete renewal application by July 31, 2006, your base will be unlicensed and will be prohibited from operating from that time forward. This renewal package is being sent to your base now to provide ample time to comply with the renewal requirements as stated above. Please be advised that if your renewal application is not complete upon submission, it will not be accepted and therefore may cause your base license not to be renewed upon expiration. Again, please note: The TLC will not accept payment unless all required documents are submitted with payment.

If you have any questions regarding the base renewal process, please feel free to phone us at 212.227.6324 or reach us at our website at www.nyc.gov/taxi.

Sincerely,
TLC Licensing Division

NYS Department of State

Division of Corporations

Entity Information

Selected Entity Name: ROMANTIQUE LIMOUSINE INC.

Selected Entity Status Information

Current Entity Name: ROMANTIQUE LIMOUSINE INC.

Initial DOS Filing Date: MARCH 09, 1981

County: RICHMOND

Jurisdiction: NEW YORK

Entity Type: DOMESTIC BUSINESS CORPORATION

Current Entity Status: ACTIVE

Selected Entity Address Information

DOS Process (Address to which DOS will mail process if accepted on behalf of the entity)

ROMANTIQUE LIMOUSINE INC.

2550 RICHMOND TERRACE

STATEN ISLAND, NEW YORK, 10303

Registered Agent

NONE

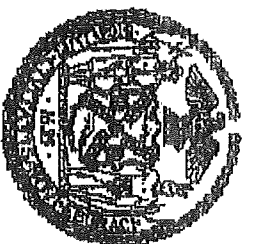
NOTE: New York State does not issue organizational identification numbers.

[Search Results](#)

[New Search](#)

[Division of Corporations, State Records and UCC Home Page](#) [NYS Department of State Home Page](#)

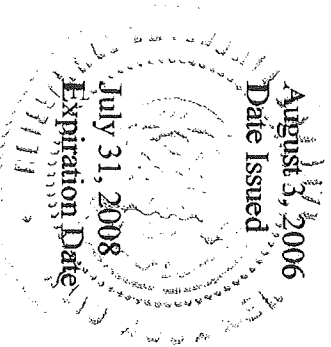
LICENSE NO: B01846
CATEGORY: LX

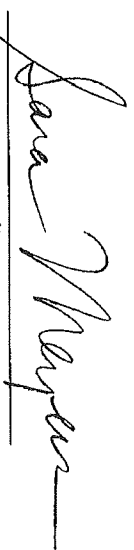


**NEW YORK CITY
TAXI & LIMOUSINE COMMISSION
FOR-HIRE VEHICLE
BASE LICENSE**

ROMANTIQUE LIMOUSINE INC.
1421 86TH STREET
BROOKLYN NY 11228

THE ABOVE NAMED BASE HAS DULY BEEN LICENSED BY THE NEW YORK CITY TAXI AND LIMOUSINE COMMISSION AND IS HEREBY AUTHORIZED TO OPERATE AS A FOR-HIRE VEHICLE BASE IN ACCORDANCE WITH SECTION 19-511 OF THE ADMINISTRATIVE CODE OF THE CITY OF NEW YORK




SARA MEYERS
DIRECTOR OF SPECIAL PROJECTS
TAXI & LIMOUSINE COMMISSION

THIS ORIGINAL LICENSE BEARING RAISED COMMISSION SEAL MUST BE PROMINENTLY DISPLAYED AND PRODUCED ON DEMAND TO A COMMISSION REPRESENTATIVE OR OTHER LAW ENFORCEMENT AGENTS. IT MAY NOT BE USED OR DISPLAYED AT ANY OTHER LOCATION OTHER THAN INDICATED ABOVE.

NYS Department of State

Division of Corporations

Entity Information

The information contained in this database is current through February 6, 2012.

Selected Entity Name: ROMANTIQUE LIMOUSINE INC.

Selected Entity Status Information

Current Entity Name: ROMANTIQUE LIMOUSINE INC.

Initial DOS Filing Date: MARCH 09, 1981

County: RICHMOND

Jurisdiction: NEW YORK

Entity Type: DOMESTIC BUSINESS CORPORATION

Current Entity Status: ACTIVE

Selected Entity Address Information

DOS Process (Address to which DOS will mail process if accepted on behalf of the entity)

ROMANTIQUE LIMOUSINE INC.

1421 86TH STREET

BROOKLYN, NEW YORK, 11228

Registered Agent

NONE

This office does not record information regarding the names and addresses of officers, shareholders or directors of nonprofessional corporations except the chief executive officer, if provided, which would be listed above. Professional corporations must include the name(s) and address(es) of the initial officers, directors, and shareholders in the initial certificate of incorporation, however this information is not recorded and only available by viewing the certificate.

*Stock Information

# of Shares	Type of Stock	\$ Value per Share
200	No Par Value	



Licensing and Standards Division
32-02 Queens Boulevard, 2nd Floor
Long Island City, New York 11101-2324
Tel: 212.227.6324, www.nyc.gov/tlc

**DIRECTIVE TO PROVIDE AND/OR CONFIRM A
VALID E-MAIL ADDRESS AND FAX NUMBER**

May 6, 2011

**ROMANTIQUE LIMOUSINE INC.,
1421 86 STREET,
BROOKLYN, NY 11228**

License Exp.: **7/31/2013**
License Status: **Current**

Dear Business Owner,

As you may know, the Taxi and Limousine Commission recently passed rules requiring that all business entities have a valid email address on file. These rules allow for the TLC to utilize this **required** email address to distribute to all licensed businesses (bases, agents, brokers, and taximeter businesses) all notices, communications, reminders (including reminders about appointments and renewals) and any other material related to Agency matters.

On the back of this letter is a **Contact Verification Form** with the current information we have on file. You must update your contact information with a valid, working email address, phone and/or fax (if necessary), then sign and return this form to the TLC Business Unit by **May 20th, 2011**. The areas in grey cannot be updated using this form. To make any changes to the areas in grey you must visit our website at www.nyc.gov/tlc to obtain all the necessary forms and requirements.

Will the TLC be using this to send all communication?

No. Your business email address may be used to give notices, communications, etc. so it is vital to keep all contact information current. The TLC will not use email alone to serve summonses or notices of violation.

I have no changes to make to my information. Do I still need to mail the form back?

Yes. The form must be returned to the TLC's Business Unit by **May 20th, 2011**, in order to remain in compliance with the applicable rules for your business type. Please review it carefully to ensure the details are correct and your phone, fax and email address have been updated. There are penalties for failing to maintain a working phone, fax, email and mailing addresses and non-compliance with a directive, so please return the form promptly by mail to:

NYC Taxi and Limousine Commission
Attn: TLC Business Unit – Email Directive
32-02 Queens Boulevard, 2nd Floor
Long Island City, New York 11101-2324

Feel free to visit our website at www.nyc.gov/tlc for more information, or you may contact our Call Center at 212.227.6324.

Licensing and Standards Division



June 09, 2011

LX
ROMANTIQUE LIMOUSINE INC.
1421 86 STREET
BROOKLYN, NY 11228

Base license number: **B01846**

Base license expires: **7/31/2013**

**DIRECTIVE TO COMPLY WITH KEEPING YOUR WHEELCHAIR ACCESSIBLE CONTRACT
CURRENT**

Failure to comply may result in the SUSPENSION of your license.

Dear Base Owner,

Your base station must be in continuous compliance with TLC Rule §59B-17(c)), which requires that all For Hire-Vehicle (FHV) base stations provide transportation service upon request to passengers with disabilities. This service must be equivalent in quality, price and response time to that provided to passengers without disabilities. Inability to provide service when requested can result in being issued a summons which carries a penalty of \$1000.00

A review of our records indicates that your base's present means of compliance with Rule 59B-17(c) is not current as your contract on file with Metroline Car and Limousine Service/Deniss Limo Inc. expired or expires on 1/30/2006. You are hereby directed by 6/23/2011 to provide proof of compliance in one of the following ways:

1. A current contract with a TLC licensed entity capable of providing your base with accessible service in accordance with Rule 59B-17(c). Please see our website for a list of licensed accessible wheelchair providers and promptly mail a copy of your contract or cooperative agreement to-

Taxi and Limousine Commission
Attn: Accessible Wheelchair Compliance
32-02 Queens Blvd, 2FI
Long Island City, NY 11101

2. Proof of ownership and TLC licensure of a 59B-17 certified accessible vehicle on your base.

Do you own an accessible vehicle and now you are interested in providing accessible wheelchair service to other base stations?

You may contact Michelle Lange at 718.391.5697 to get information on becoming a TLC certified wheelchair provider.

Please Note - Failure to comply with this directive by the date noted above will constitute a failure to comply with Rule §59B-17(c) of the NYC Taxi and Limousine Commission rules and will subject you to a summons which carries a penalty of suspension until compliance. If the base is suspended it cannot operate so it is in your best interest to comply by the deadline date.

For general licensing inquiries feel free to contact our Call Center at 212.227.6324 or visit our website at www.nyc.gov/tlc.

Sincerely,

Applicant Licensing, Owners Section



AHAVA Access Inc.6002 Foster Avenue
Brooklyn, NY 11236
WWW.AMBULETTE.ORG
QUESTIONS@AMBULETTE.ORGTel. (718) 252-1111
Fax. (718) 75-1856
(800) 244-AHAVA136 2000
6-15-11

June 15, 2011

LETTER OF CONTRACT

State of New York

Owner's Name: JOHN DILRO
Base: ROMANTIQUE LIMOUSINE INC
R01846
Base License: 1421 86 ST, BROOKLYN, 11228
Address: 718-232-7273
Telephone:

Subject: AVR 6-07 (f) Contract for One (1) Year-Expiration Date: 05/31/12

To Whom It May Concern:

This is to confirm that **AHAVA Access Inc.** has authorized

ROMANTIQUE LIMOUSINE INC

To contract AHAVA Access Inc. handicapped accessible vehicles to provide transportation services for disabled persons (wheelchair bound).

AHAVA Access Inc NYS DOT Authority #30629 is registered under the New York City Taxi and Limousine Commission (NYC TL&C) Base License B90058 and is in full compliance with NYS DOT and NYS DOH rules and regulations.

AHAVA Access Inc. undertakes to deliver handicapped transportation services on request from your radio dispatch base on the terms and conditions known as equivalent service and as is defined under the Accessible Vehicle Rule 6-07(f).

This contract shall be in effect for one year and will expire on date indicated above. Both parties to this contract hereby confirm acceptance of this contract. Contract is valid only when signed by AHAVA Access Inc. authorized representative.

Client may retain the original copy of the contract as proof of AVR compliance for the NYC Taxi and Limousine Commission.

NYC T&LC APPROVED VEHICLES LICENSE PLATES: 33741LA, 63517LA.

Signature

Boris Gadas, General Manager

ACCEPTED June 15, 2011

LY827977-4534

Please read Important instruction on Backside !!!



Meera Joshi
Commissioner

Gary Weiss
Deputy Commissioner
Licensing and Standards
31-00 47TH AVENUE, 3RD floor
Long Island City, NY 11101

+1 718 391 5501 tel

April 6, 2016

LIC-NBR: B01846
ROMANTIQUE LIMOUSINE INC..
1421 86 STREET
BROOKLYN NY 11228

Dear Base Owner:

This is a courtesy letter

The Taxi & Limousine Commission was notified about the expired/ cancellation of:

Current Worker's Compensation doesn't reflect the current base name therefore you would need to send me a correct copy reflecting the above base name. Included is a copy of the policy you sent which does not have the correct base name on it.

Presently, your license to operate a Base expires on **July 31, 2017** and these documents are a fundamental part in maintaining a properly registered Base. Please provide documentation for your base that reflects active or current coverage.

If you have any questions regarding this matter, please call me at 718.391.5661. Please disregard if you have received a directive prior or post this notification.

Sincerely,
Asia Hill

Asia Hill
Licensing and Standard Division
Taxi & Limousine Commission.

NEW YORK STATE INSURANCE FUND

199 CHURCH ST, NEW YORK, NY, 10007-1100
(888) 875-5790

B 01846

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

[0001-#####][14341-01][DP222CRT-CTC1##][01-00372]

NYC TAXI & LIMOUSINE

COMMISSION

32-02 QUEENS BLVD

LONG ISLAND CITY NY 11101

POLICY NUMBER
K 1189 725-3

DATE
3/22/2016

CERTIFICATE NUMBER
531-655

PERIOD COVERED BY THIS CERTIFICATE

4/07/2011 TO 1/31/2017

POLICYHOLDER

ROMANTIQUE DOUBLE DIAMOND INC
1421 86TH STREET
BROOKLYN NY 11228-3407

CERTIFICATE HOLDER

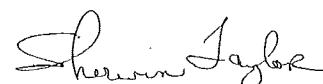
NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE STATE INSURANCE FUND UNDER POLICY NO. K 1189 725-3 UNTIL 1/31/2017 COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW.

IF SAID POLICY IS CANCELLED, OR CHANGED PRIOR TO 1/31/2017 IN SUCH MANNER AS TO AFFECT THIS CERTIFICATE, 10 DAYS WRITTEN NOTICE OF SUCH CANCELLATION WILL BE GIVEN TO THE CERTIFICATE HOLDER ABOVE. NOTICE BY REGULAR MAIL SO ADDRESSED SHALL BE SUFFICIENT COMPLIANCE WITH THIS PROVISION. THE STATE INSURANCE FUND DOES NOT ASSUME ANY LIABILITY IN THE EVENT OF FAILURE TO GIVE SUCH NOTICE.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

THE STATE INSURANCE FUND



DIRECTOR, INSURANCE FUND UNDERWRITING

NEW YORK CITY TAXI & LIMOUSINE COMMISSION
FOR-HIRE VEHICLE BASE STATION LICENSE APPLICATION

NAME: ROMANTIQUE Limousine CORPORATION ☒
D/B/A: SAME PARTNERSHIP ☐
ADDRESS: 1421 86TH STREET SOLE PROPRIETORSHIP ☐
BROOKLYN NY 11228 TEL. # 718 232-7273
EIN#/SS#: [REDACTED] FCC LICENSE#: _____

LIST ALL OWNERS, PARTNERS, OFFICERS AND STOCKHOLDERS (USE ADDITIONAL PAGES IF NECESSARY):

NAME: JOHN Dileo DATE OF BIRTH: [REDACTED]
ADDRESS: [REDACTED] SS#: [REDACTED]
TITLE: President
HOW LONG AT THIS ADDRESS? [REDACTED] # OF SHARES: 50% = 100

NAME: Michael Persico DATE OF BIRTH: [REDACTED]
ADDRESS: [REDACTED] SS#: [REDACTED]
TITLE: Vice President
HOW LONG AT THIS ADDRESS? _____ # OF SHARES: 50% = 100

NAME: _____ DATE OF BIRTH: _____
ADDRESS: _____ SS#: _____
TITLE: _____
HOW LONG AT THIS ADDRESS? _____ # OF SHARES: _____

NAME: _____ DATE OF BIRTH: _____
ADDRESS: 1 SS#: _____
TITLE: _____
HOW LONG AT THIS ADDRESS? _____ # OF SHARES: _____

NEW YORK CITY TAXI & LIMOUSINE COMMISSION
FOR-HIRE VEHICLE BASE STATION LICENSE APPLICATION
FINANCIAL DISCLOSURE STATEMENT

TLC NUMBER:

BUSINESS INFORMATION:

NAME: ROMANTIQUE limousine

DATE OF BIRTH:

D/B/A: SAME

3-17-65

ADDRESS: 1421 86TH ST

BROOKLYN NY 11228

EIN#/SS#: [REDACTED]

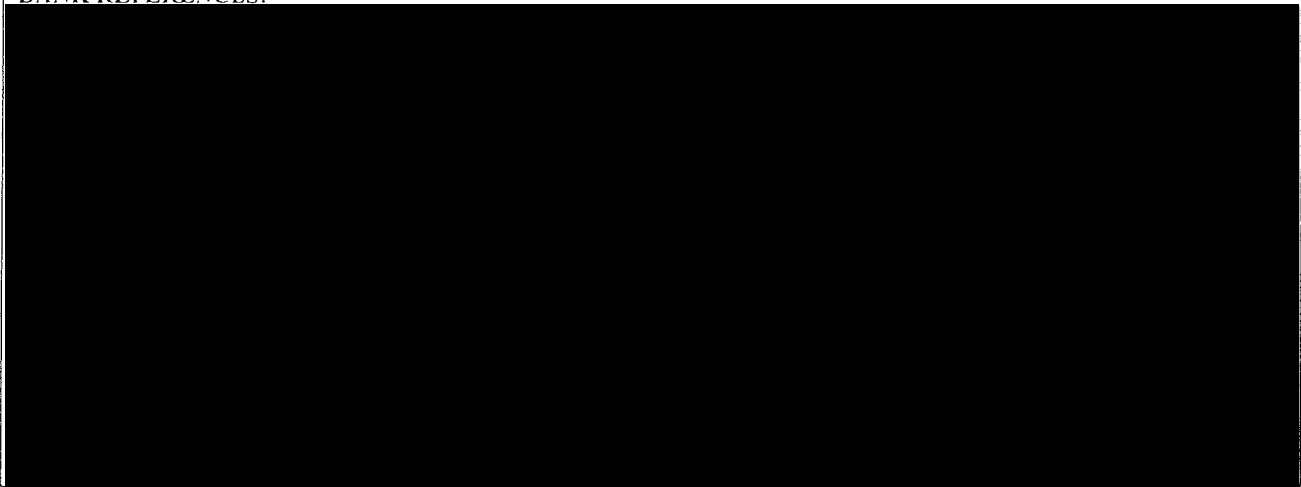
TEL. # (718) 232-7273

LEASED AMOUNT: \$500⁰⁰ LEASE EXPIRES: _____

NAME OF PARTNERS OR OFFICERS/STOCKHOLDERS AND % OWNED:

- | | |
|--------------------------------------|------------|
| 1. <u>John Dileo</u> <u>50</u> % | 3. _____ % |
| 2. <u>Michael Perico</u> <u>50</u> % | 4. _____ % |

BANK REFERENCES:



301846.

CP

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546
CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 9/17/2007
CERTIFICATE NUMBER 465-909

PERIOD COVERED BY THIS CERTIFICATE
1/31/2000 TO 1/31/2008

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE STATE INSURANCE FUND UNDER POLICY NO. 1189 725-3 UNTIL 1/31/2008, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK.

IF SAID POLICY IS CANCELLED, OR CHANGED PRIOR TO 1/31/2008 IN SUCH MANNER AS TO AFFECT THIS CERTIFICATE, 5 DAYS WRITTEN NOTICE OF SUCH CANCELLATION WILL BE GIVEN TO THE CERTIFICATE HOLDER ABOVE. NOTICE BY REGULAR MAIL SO ADDRESSED SHALL BE SUFFICIENT COMPLIANCE WITH THIS PROVISION.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

THE STATE INSURANCE FUND

John Manetti
DIRECTOR, INSURANCE FUND UNDERWRITING

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 9/17/2007
CERTIFICATE NUMBER 977-362

PERIOD COVERED BY THIS CERTIFICATE
1/31/2004 TO 1/31/2008

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

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THIS CERTIFICATE DOES NOT APPLY TO BUILDING DEMOLITION.

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THE STATE INSURANCE FUND

John Manetti
DIRECTOR, INSURANCE FUND UNDERWRITING

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546

CANCELLATION OF CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 9/14/2007
CERTIFICATE NUMBER 465-909

PERIOD COVERED BY THIS CERTIFICATE
1/31/2000 TO 10/04/2007

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

THIS IS TO ADVISE THAT THE WORKERS' COMPENSATION POLICY ISSUED TO THE POLICYHOLDER
NAMED ABOVE HAS BEEN CANCELLED EFFECTIVE 10/04/2007.

THIS INFORMATION IS FURNISHED YOU IN COMPLIANCE WITH TERMS OF THE CERTIFICATE OF
INSURANCE NUMBERED AS ABOVE AND ANY OTHER CERTIFICATE OF INSURANCE PREVIOUSLY
ISSUED TO YOU AT THE POLICYHOLDER'S REQUEST UNDER THE ABOVE POLICY NUMBER.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS
NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT
AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

CANCELLATION

U-26.3

THE STATE INSURANCE FUND

John Manetti
DIRECTOR, INSURANCE FUND UNDERWRITING

B0846

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546

CANCELLATION OF CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 9/14/2007
CERTIFICATE NUMBER 977-362

PERIOD COVERED BY THIS CERTIFICATE
1/31/2004 TO 10/04/2007

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

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THIS INFORMATION IS FURNISHED YOU IN COMPLIANCE WITH TERMS OF THE CERTIFICATE OF INSURANCE NUMBERED AS ABOVE AND ANY OTHER CERTIFICATE OF INSURANCE PREVIOUSLY ISSUED TO YOU AT THE POLICYHOLDER'S REQUEST UNDER THE ABOVE POLICY NUMBER.

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CANCELLATION

U-26.3

THE STATE INSURANCE FUND

John Manetti
DIRECTOR, INSURANCE FUND UNDERWRITING

B01846

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546

CANCELLATION OF CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 12/14/2006
CERTIFICATE NUMBER 977-362

PERIOD COVERED BY THIS CERTIFICATE
1/31/2004 TO 1/03/2007

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

THIS IS TO ADVISE THAT THE WORKERS' COMPENSATION POLICY ISSUED TO THE POLICYHOLDER NAMED ABOVE HAS BEEN CANCELLED EFFECTIVE 1/03/2007.

THIS INFORMATION IS FURNISHED YOU IN COMPLIANCE WITH TERMS OF THE CERTIFICATE OF INSURANCE NUMBERED AS ABOVE AND ANY OTHER CERTIFICATE OF INSURANCE PREVIOUSLY ISSUED TO YOU AT THE POLICYHOLDER'S REQUEST UNDER THE ABOVE POLICY NUMBER.

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CANCELLATION

THE STATE INSURANCE FUND

Vincent M. Iannicelli

DIRECTOR, INSURANCE FUND UNDERWRITING

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546
CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER
+K 1189 725-3

DATE
12/15/2006

CERTIFICATE NUMBER
977-362

PERIOD COVERED BY THIS CERTIFICATE
1/31/2004 TO 1/31/2008

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

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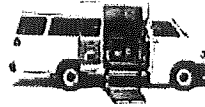
THE STATE INSURANCE FUND

Vincent M. Tranter

DIRECTOR, INSURANCE FUND UNDERWRITING



6002 Foster Avenue
Brooklyn, NY 11236
WWW.AMBULETTE.ORG
QUESTIONS@AMBULETTE.ORG



Tel. (718) 252-1111
Fax. (718) 75-1856
(800) 244-AHAVA

June 15, 2011

LETTER OF CONTRACT

State of New York

Owner's Name: JOHN DILEO
Base: ROMANNTIQUE LIMOUSINE INC
B01846
Base License: 1421 86 ST, BROOKLYN, 11228
Address: 718-232-7273
Telephone:

Subject: AVR 6-07 (f) Contract for One (1) Year-Expiration Date: 05/31/12

To Whom It May Concern:

This is to confirm that **AHAVA Access Inc.** has authorized

ROMANNTIQUE LIMOUSINE INC

To contract AHAVA Access Inc. handicapped accessible vehicles to provide transportation services for disabled persons (wheelchair bound).

AHAVA Access Inc NYS DOT Authority #30629 is registered under the New York City Taxi and Limousine Commission (NYC TL&C) Base License B90058 and is in full compliance with NYS DOT and NYS DOH rules and regulations.

AHAVA Access Inc. undertakes to deliver handicapped transportation services on request from your radio dispatch base on the terms and conditions known as equivalent service and as is defined under the Accessible Vehicle Rule 6-07(f).

This contract shall be in effect for one year and will expire on date indicated above. Both parties to this contract hereby confirm acceptance of this contract. Contract is valid only when signed by AHAVA Access Inc. authorized representative.

Client may retain the original copy of the contract as proof of AVR compliance for the NYC Taxi and Limousine Commission.

NYC T&LC APPROVED VEHICLES LICENSE PLATES: 33741LA, 63517LA.

Signature

Boris Gadas, General Manager

ACCEPTED June 15, 2011

IY827977-4534

Please read important instruction on backside !!!

IMPORTANT !!! IMPORTANT !!!IMPORTANT !!!

Please follow these several simple steps to help us to efficiently provide service for your special needs clients:

1. Before calling us with a transportation request, please get the following:
 - a) Client name
 - b) Address
 - c) Telephone
 - d) Destination
 - e) Date and time of pick-up
 - f) Quote your price for the job including tolls to your client at regular rates
(NYC T&LC requires you to charge same price as you would for your sedans).
2. Call our office and give our operator all of the above information. We will quote a price (25% discount from our standard rates).
3. Your cost will be the difference between our discounted price and price you quoted to the client.
4. We will contact your client, confirm all arrangements and schedule the trip. (We will make the best effort to accommodate your clients within one hour depending of location.)
5. Our operator will call you back to inform you if the job was scheduled or not.
6. After completion of the job we will send you a bill and expect the payment within 10 business days.
7. You can pay by any credit or debit card.
8. If the job was a no show we will charge you 30%-50% of our quoted price depending on pick-up location.

Please share this information with your staff.

Questions? Please call 718.252.5555.



NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

THE STATE INSURANCE FUND
UNDERWRITING DEPARTMENT
199 CHURCH STREET
NEW YORK, N.Y. 10007
ADDRESS SERVICE REQUESTED

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE
PAID
MAILED FROM ZIPCODE 12288
PERMIT NO. 541

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

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ADDRESS SERVICE REQUESTED

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FIRST-CLASS MAIL
U.S. POSTAGE
PAID
MAILED FROM ZIPCODE 12288
PERMIT NO. 541

AFFIDAVIT OF CORPORATE OFFICERS ELECTION

NAME: ROMANTIQUE LIMOUSINE INC DATE: 3/11/04

D/B/A: Same

ADDRESS: 1421 86TH ST
BROOKLYN NY 11228

CORP. EIN#/SS#: [REDACTED] TEL. # (718) 232-7273

AT A SPECIAL MEETING HELD ON THIS DAY AT THE ABOVE PREMISES, STOCKHOLDERS OF ABOVE-REFERENCED CORPORATION NOMINATED AND DULY ELECTED BY UNANIMOUS VOTE THE FOLLOWING OFFICERS:

NAME: JOHN Dileo

DATE OF BIRTH: [REDACTED]

ADDRESS: [REDACTED]

SS#: [REDACTED]

TITLE: President

HOW LONG AT THIS ADDRESS? [REDACTED]

OF SHARES: 50%

NAME: Michael Persico

DATE OF BIRTH: [REDACTED]

ADDRESS: [REDACTED]

SS#: [REDACTED]

TITLE: Vice President

HOW LONG AT THIS ADDRESS? [REDACTED]

OF SHARES: 50%

NAME: _____

DATE OF BIRTH: _____

ADDRESS: _____

SS#: _____

TITLE: _____

HOW LONG AT THIS ADDRESS? _____

OF SHARES: _____

NAME: _____

DATE OF BIRTH: _____

ADDRESS: _____

SS#: _____

TITLE: _____

HOW LONG AT THIS ADDRESS? _____

OF SHARES: _____

AFFIX
CORPORATE
SEAL
HERE

SECRETARY'S SIGNATURE: [Signature]

HAS ANY INDIVIDUAL OR FIRM WHOSE NAME APPEARS ON THIS APPLICATION EVER:

A) BEEN CONVICTED OF ANY CRIME ANYWHERE?

YES ☐ NO ☒

B) HAD ANY TYPE LICENSE SUSPENDED OR REVOKED?

YES [] NO [✓]

C) APPLIED FOR AND / OR RECEIVED ANY TYPE OF LICENSE GRANTED BY THE NYC TAXI & LIMOUSINE COMMISSION?

YES [✓] NO []

IF YOU ANSWERED "YES" TO ANY OF THE PRECEDING THREE QUESTIONS YOU MUST PROVIDE A SIGNED STATEMENT AND PERTINENT DOCUMENTATION GIVING ALL RELEVANT DETAILS (NAMES, DATES, LICENSES NUMBER, CERTIFICATES OF DISPOSITION, ETC.)

OFF-STREET PARKING FACILITY:

ADDRESS: _____

OF SPACES: _____

FOR OFFICE USE ONLY:

APPLICATION ACCEPTED BY / DATE: _____

APPROVED ☐

DMV CHECK: _____

TLC / OJE CHECK: _____

DISAPPROVED ☐

NEW YORK CITY TAXI & LIMOUSINE COMMISSION
FOR-HIRE VEHICLE BASE STATION LICENSE APPLICATION

NAME: ROMANTIQUE LIMOUSINE CORPORATION ☒
D/B/A: SAME PARTNERSHIP ☐
ADDRESS: 1421 86TH STREET SOLE PROPRIETORSHIP ☐
BROOKLYN NY 11228 TEL. # (718) 232-7273
EIN#/SS#: [REDACTED] FCC LICENSE#: _____

LIST ALL OWNERS, PARTNERS, OFFICERS AND STOCKHOLDERS (USE ADDITIONAL PAGES IF NECESSARY):

NAME: JOHN Dileo DATE OF BIRTH: [REDACTED]
ADDRESS: [REDACTED] SS#: [REDACTED]
TITLE: President
HOW LONG AT THIS ADDRESS? [REDACTED] # OF SHARES: 50% = 100

NAME: Michael Persico DATE OF BIRTH: [REDACTED]
ADDRESS: [REDACTED] SS#: [REDACTED]
TITLE: Vice President
HOW LONG AT THIS ADDRESS? _____ # OF SHARES: 50% = 100

NAME: _____ DATE OF BIRTH: _____
ADDRESS: _____ SS#: _____
TITLE: _____
HOW LONG AT THIS ADDRESS? _____ # OF SHARES: _____

NAME: _____ DATE OF BIRTH: _____
ADDRESS: 1 SS#: _____
TITLE: _____
HOW LONG AT THIS ADDRESS? _____ # OF SHARES: _____

NEW YORK CITY TAXI & LIMOUSINE COMMISSION
FOR-HIRE VEHICLE BASE STATION LICENSE APPLICATION
FINANCIAL DISCLOSURE STATEMENT

TLC NUMBER:

BUSINESS INFORMATION:

NAME: ROMANTIQUE Limousine

DATE OF BIRTH:

D/B/A: SAME

ADDRESS: 1421- 86TH ST

BROOKLYN NY 11228

EIN#/SS#: [REDACTED]

TEL. # (718) 232-7273

LEASED AMOUNT: [REDACTED] LEASE EXPIRES:

NAME OF PARTNERS OR OFFICERS/STOCKHOLDERS AND % OWNED:

- | | |
|---------------------------------------|----------------------------------|
| 1. <u>John Dileo</u> <u>50</u> % | 3. <u> </u> % |
| 2. <u>Michael Persico</u> <u>50</u> % | 4. <u> </u> % |

BANK REFERENCES:

[REDACTED]

301846.

CP

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546
CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 9/17/2007
CERTIFICATE NUMBER 465-909

PERIOD COVERED BY THIS CERTIFICATE
1/31/2000 TO 1/31/2008

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE STATE INSURANCE FUND UNDER POLICY NO. 1189 725-3 UNTIL 1/31/2008, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK.

IF SAID POLICY IS CANCELLED, OR CHANGED PRIOR TO 1/31/2008 IN SUCH MANNER AS TO AFFECT THIS CERTIFICATE, 5 DAYS WRITTEN NOTICE OF SUCH CANCELLATION WILL BE GIVEN TO THE CERTIFICATE HOLDER ABOVE. NOTICE BY REGULAR MAIL SO ADDRESSED SHALL BE SUFFICIENT COMPLIANCE WITH THIS PROVISION.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

THE STATE INSURANCE FUND

John Manetti
DIRECTOR, INSURANCE FUND UNDERWRITING

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546
CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 9/17/2007
CERTIFICATE NUMBER 977-362

PERIOD COVERED BY THIS CERTIFICATE
1/31/2004 TO 1/31/2008

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

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THE STATE INSURANCE FUND

John Manetti
DIRECTOR, INSURANCE FUND UNDERWRITING

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546

CANCELLATION OF CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER
+K 1189 725-3

DATE
9/14/2007

CERTIFICATE NUMBER
465-909

PERIOD COVERED BY THIS CERTIFICATE
1/31/2000 TO 10/04/2007

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

THIS IS TO ADVISE THAT THE WORKERS' COMPENSATION POLICY ISSUED TO THE POLICYHOLDER NAMED ABOVE HAS BEEN CANCELLED EFFECTIVE 10/04/2007.

THIS INFORMATION IS FURNISHED YOU IN COMPLIANCE WITH TERMS OF THE CERTIFICATE OF INSURANCE NUMBERED AS ABOVE AND ANY OTHER CERTIFICATE OF INSURANCE PREVIOUSLY ISSUED TO YOU AT THE POLICYHOLDER'S REQUEST UNDER THE ABOVE POLICY NUMBER.

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CANCELLATION

U-26.3

THE STATE INSURANCE FUND

John Manetti
DIRECTOR, INSURANCE FUND UNDERWRITING

B0846

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546

CANCELLATION OF CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 9/14/2007
CERTIFICATE NUMBER 977-362

PERIOD COVERED BY THIS CERTIFICATE
1/31/2004 TO 10/04/2007

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

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CANCELLATION

U-26.3

THE STATE INSURANCE FUND

John Manetti
DIRECTOR, INSURANCE FUND UNDERWRITING

B01846

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546

CANCELLATION OF CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER +K 1189 725-3
DATE 12/14/2006
CERTIFICATE NUMBER 977-362

PERIOD COVERED BY THIS CERTIFICATE
1/31/2004 TO 1/03/2007

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

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CANCELLATION

U-26.3

THE STATE INSURANCE FUND

Vincent M. Tranter

DIRECTOR, INSURANCE FUND UNDERWRITING

NEW YORK STATE INSURANCE FUND
199 CHURCH STREET, NEW YORK, N.Y. 10007-1100
(212) 587-5546
CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

NYC TAXI & LIMOUSINE
COMMISSION
32-02 QUEENS BLVD
LONG ISLAND CITY NY 11101

POLICY NUMBER
+K 1189 725-3

DATE
12/15/2006

CERTIFICATE NUMBER
977-362

PERIOD COVERED BY THIS CERTIFICATE
1/31/2004 TO 1/31/2008

POLICYHOLDER

ROMANTIQUE LIMOUSINE INC
% JOHN DILEO
1421 86TH STREET
BROOKLYN NY 11219

CERTIFICATE HOLDER

NYC TAXI & LIMOUSINE
COMMISSION
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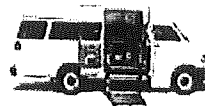
THE STATE INSURANCE FUND

Vincent M. Tranter

DIRECTOR, INSURANCE FUND UNDERWRITING



6002 Foster Avenue
Brooklyn, NY 11236
WWW.AMBULETTE.ORG
QUESTIONS@AMBULETTE.ORG



Tel. (718) 252-1111
Fax. (718) 75-1856
(800) 244-AHAVA

June 15, 2011

LETTER OF CONTRACT

State of New York

Owner's Name: JOHN DILEO
Base: ROMANNTIQUE LIMOUSINE INC
B01846
Base License: 1421 86 ST, BROOKLYN, 11228
Address: 718-232-7273
Telephone:

Subject: AVR 6-07 (f) Contract for One (1) Year-Expiration Date: 05/31/12

To Whom It May Concern:

This is to confirm that **AHAVA Access Inc.** has authorized

ROMANNTIQUE LIMOUSINE INC

To contract AHAVA Access Inc. handicapped accessible vehicles to provide transportation services for disabled persons (wheelchair bound).

AHAVA Access Inc NYS DOT Authority #30629 is registered under the New York City Taxi and Limousine Commission (NYC TL&C) Base License B90058 and is in full compliance with NYS DOT and NYS DOH rules and regulations.

AHAVA Access Inc. undertakes to deliver handicapped transportation services on request from your radio dispatch base on the terms and conditions known as equivalent service and as is defined under the Accessible Vehicle Rule 6-07(f).

This contract shall be in effect for one year and will expire on date indicated above. Both parties to this contract hereby confirm acceptance of this contract. Contract is valid only when signed by AHAVA Access Inc. authorized representative.

Client may retain the original copy of the contract as proof of AVR compliance for the NYC Taxi and Limousine Commission.

NYC T&LC APPROVED VEHICLES LICENSE PLATES: 33741LA, 63517LA.

Signature

Boris Gadas, General Manager

ACCEPTED June 15, 2011

IY827977-4534

Please read important instruction on backside !!!



Address Service Requested

G-34A

[illegible]

0.0534
H METERS 19827



PO Box 5077
Sioux Falls SD 57117-5077



U.S. POSTAGE  PITNEY BOWES
ZIP 57103 \$ 000.41⁹
02 4M
00000338602 JUL 12 2016



Address Service Requested



THE NEW YORK PUBLIC LIBRARY
ASTOR LENOX TILDEN FOUNDATION
1892



G-34.A



G-34A

[illegible][illegible]

Address Service Requested



PRESENTED BY

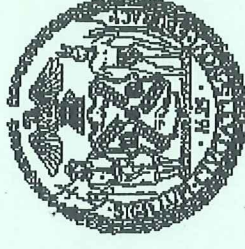


New York State Insurance Fund

199 CHURCH ST
NEW YORK NY 10007

LICENSE NO. B01846
CATEGORY: LX

NEW YORK CITY TAXI & LIMOUSINE COMMISSION



FOR-HIRE VEHICLE

BASE LICENSE

ROMANTIQUE LIMOUSINE, INC.

6717 11th AVENUE

BROOKLYN NY 11219

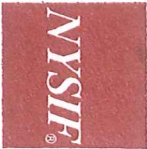
THE ABOVE NAMED BASE HAS DULY BEEN LICENSED BY THE NEW YORK CITY TAXI AND LIMOUSINE COMMISSION AND IS HEREBY AUTHORIZED TO OPERATE AS A FOR-HIRE VEHICLE BASE IN ACCORDANCE WITH SECTION 19-511 OF THE ADMINISTRATIVE CODE OF THE CITY OF NEW YORK

December 6, 2002
Date Issued

July 31, 2004
Expiration Date

WILLIAM CARTER
EXECUTIVE DIRECTOR
LICENSING DIVISION

THIS ORIGINAL LICENSE BEARING RAISED COMMISSION SEAL MUST BE PROMINENTLY DISPLAYED AND PRODUCED ON DEMAND TO A COMMISSION REPRESENTATIVE OR OTHER LAW ENFORCEMENT AGENTS. IT MAY NOT BE USED OR DISPLAYED AT ANY OTHER LOCATION OTHER THAN INDICATED ABOVE.



New York State Insurance Fund
199 CHURCH STREET
NEW YORK, NY 10007

Address Service Requested



ADDRESS 1101

G-34A



New York State Insurance Fund
199 CHURCH ST
NEW YORK NY 10007

Address Service Requested



PRSRT AUTO
FIRST-CLASS



US POSTAGE \$00.41⁶
MAR 23 2016
ZIP 0801 1052043



PRESORTED
FIRST CLASS



00300
HAWKES-ROSE

G-34A

ADDRESS 1101

ADDRESS 1101

07/25/06 NEW YORK CITY TAXI & LIMOUSINE COMMISSION 09:00:57
32 - 02 QUEENS BLVD. L.I.C., NEW YORK - 11101
CAMIS-ID: 40773503 TYPE: BAS LICENSE#: B01846
RECEIPT#: 11391777 20060725 UXG
ROMANTIQUE LIMOUSINE INC.
1421 86 STREET BROOKLYN 11228
BASE LICENSE RENEWAL

FISA-CODE	PAYOR: ROMANTIQUE LIMOUSINE INC.	AMOUNT	CHECK-NBR
231	FHV BASE LICENSE	500.00	CK 14363
231	FHV BASE LICENSE	500.00	

TOTAL-AMOUNT: 1000.00

03/18/04 NEW YORK CITY TAXI & LIMOUSINE COMMISSION 11:16:44
32 - 02 QUEENS BLVD. L.I.C., NEW YORK - 11101
CAMIS-ID: 40773503 TYPE: BAS LICENSE#: B01846
RECEIPT#: 1095E157 20040318 AMS

ROMANTIQUE LIMOUSINE INC.
6717 11 AVENUE BROOKLYN 11219
ADDRESS CHANGE

FISA-CODE PAYOR: ROMANTIQUE LIMOUSINE INC. AMOUNT
231 FHV BASE LICENSE 500.00 CK 942E

CHECK-NBR

TOTAL-AMOUNT: 500.00

FedEx US Airbill
Express

FedEx
Tracking
Number

8737 7258 9265

1 From

Date

Sender's
Name

Phone

Company

Address

City

State

ZIP

2 Your Internal Billing Reference

3 To

Recipient's
Name

Phone

Company

Address

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City

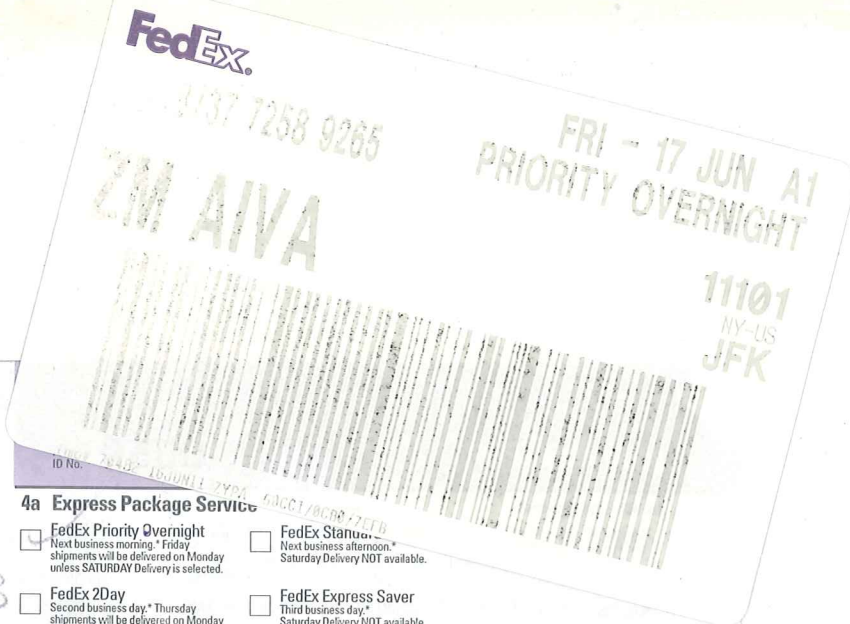
State

ZIP



8737

367 2 D
9265
06.17



4a Express Package Service

☐ **FedEx Priority Overnight**
Next business morning.* Friday
shipments will be delivered on Monday
unless SATURDAY Delivery is selected.

☐ **FedEx Start**
Next business afternoon.*
Saturday Delivery NOT available.

☐ **FedEx 2Day**
Second business day.* Thursday
shipments will be delivered on Monday
unless SATURDAY Delivery is selected.

☐ **FedEx Express Saver**
Third business day.*
Saturday Delivery NOT available.

4b Express Freight Service

** To most locations.

Packages over 150 lbs.

☐ **FedEx 1Day Freight**
Next business day.** Friday shipments will
be delivered on Monday unless SATURDAY
Delivery is selected.

FedEx 1Day Freight Booking No.

☐ **FedEx 2Day Freight**
Second business day.** Thursday shipments will be delivered
on Monday unless SATURDAY Delivery is selected.

☐ **FedEx 3Day Freight**
Third business day.** Saturday Delivery NOT available.

5 Packaging

* Declared value limit \$500.

☐ **FedEx
Envelope***

☐ **FedEx Pak***
Includes FedEx Small Pak and
FedEx Large Pak.

☐ **FedEx
Box**

☐ **FedEx
Tube**

☐ **Other**

6 Special Handling and Delivery Signature Options

☐ **SATURDAY Delivery**
NOT available for FedEx Standard Overnight, FedEx Express Saver, or FedEx 3Day Freight.

☐ **No Signature Required**
Package may be left without
obtaining a signature for delivery.

☐ **Direct Signature**
Someone at recipient's address
may sign for delivery. Fee applies.

☐ **Indirect Signature**
If no one is available at recipient's
address, someone at a neighboring
address may sign for delivery. For
residential deliveries only. Fee applies.

Does this shipment contain dangerous goods?

One box must be checked.

☐ **No** ☐ **Yes**
As per attached
Shipper's Declaration.

☐ **Yes**
Shipper's Declaration
not required.

☐ **Dry Ice**
Dry ice, 9, UN 1845 x kg

☐ **Cargo Aircraft Only**

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging
or placed in a FedEx Express Drop Box.

7 Payment Bill to:

☐ **Sender**
Acct. No. in Section
I will be billed.

Enter FedEx Acct. No. or Credit Card No. below.

☐ **Recipient**

☐ **Third Party**

☐ **Credit Card**

Obtain recip.
Acct. No. ☐

☐ **Cash/Check**

Total Packages

Total Weight

Total Declared Value¹

Credit Card Auth.

lbs. \$.00

¹Our liability is limited to \$100 unless you declare a higher value. See the current FedEx Service Guide for details.

606

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Customer: This service area is provided for your internal use and convenience. Service must be marked on airbill.

FedEx Service:

FedEx

emp: 421704 18MAR04

PRIORITY OVERNIGHT

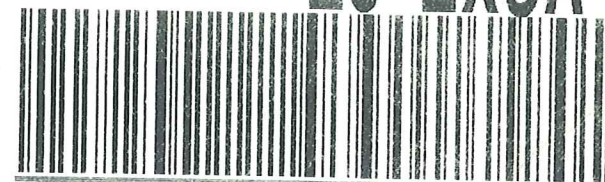
FRI

TRK# 8375 9856 3776 FORM 0200

Deliver By: 19MAR04

A1

11101 -NY-US Z5 ZXSA



Form I.D. No.

0200

Recipient's Copy

FedEx Express USA Airbill

FedEx Tracking Number

837598563776

1 From

Date

3/18/04

Sender's Name

John Di Leo

Phone

718 232 7273

Company

Pomanteigie Lemquaine

Address

1421-86th Street

City

Brooklyn

State

NY

ZIP

11278

2 Your Internal Billing Reference

3 To Recipient's Name

Attn: Angelique

Phone

Company

N.Y.C. Girl & Lemquaine Commission

Address

2nd floor

Address

3202 Queens Blvd.

City

Long Island City

State

N.Y.

ZIP

11101



4a Express Package Service

☐ FedEx Priority Overnight
Next business morning

☐ FedEx Standard Overnight
Next business afternoon

Packages up to 150 lbs.
Delivery commitment may be later in some areas.
☐ FedEx First Overnight
Earliest next business morning delivery to select locations

☐ FedEx 2Day
Second business day

☐ FedEx Express Saver
Third business day

4b Express Freight Service

☐ FedEx 1Day Freight*
Next business day

☐ FedEx 2Day Freight
Second business day

Packages over 150 lbs.
Delivery commitment may be later in some areas.
☐ FedEx 3Day Freight
Third business day

* Call for Confirmation:

5 Packaging

☐ FedEx Envelope*

☐ FedEx Pak*
Includes FedEx Small Pak, FedEx Large Pak, and FedEx Sturdy Pak

☐ Other

* Declared value limit \$500

6 Special Handling

☐ SATURDAY Delivery
Available only for FedEx Priority Overnight and FedEx 2Day to select ZIP codes

☐ HOLD Weekday at FedEx Location
Not available for FedEx First Overnight

☐ HOLD Saturday at FedEx Location
Available only for FedEx Priority Overnight and FedEx 2Day to select locations

Does this shipment contain dangerous goods?
One box must be checked.

☐ No

☐ Yes
As per attached Shipper's Declaration not required

☐ Yes
Shipper's Declaration not required

☐ Dry Ice
Dry Ice, 9, UN 1845

☐ Cargo Aircraft Only

7 Payment Bill to:

☐ Sender
Acct. No. in Section 1 will be billed.

☐ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

Total Packages

Total Weight

Total Declared Value†

Total Charges

\$.00

8 Release Signature

Sign to authorize delivery without obtaining signature.

By signing you authorize us to deliver this shipment without obtaining a signature and agree to indemnify and hold us harmless from any resulting claims.
Questions? Visit our Web site at fedex.com
or call 1.800.Go.FedEx® 800.463.3339.
Rev. Date 10/01 • Part #157612 • ©1994-2001 FedEx • PRINTED IN U.S.A. WCSL 02

446

FedEx[®] Express

ORIGIN ID: FBTA
THOMAS AELLIS
1421 86TH STREET
BROOKLYN, NY 11228
UNITED STATES US

(718) 232-7273

SHIP DATE: 15JUL16
ACTWGT: 1.00 LB
CAD: 104438953/NET3730

BILL SENDER

TO LICENSING AND STANDARDS
NYC TAXI & LIMOUSINE COMMISSION
31-00 47TH AVENUE
3RD FLOOR

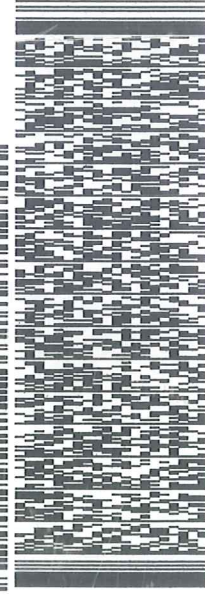
LONG ISLAND CITY NY 11101

REF: (718) 391-5501

INV:

PO:

DEPT:



FedEx[®] Express



540J16C8D727F

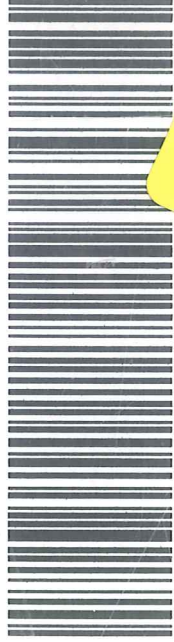
MON - 18 JUL 3:00P
STANDARD OVERNIGHT

TRK# 7767 6381 7472

0201

E4 AIVA

11101
NY-JS JFK



Extremely Urgent

After printing this label:

FedEx Ship Manager - Print Your Label(s)

7/15/2016

Insert shipping
document here.



ORIGIN ID:FBTA
THOMAS AELLIS
1421 86TH STREET
BROOKLYN, NY 11228
UNITED STATES US

SHIP DATE: 08FEB18
ACTWGT: 1.00 LB
CAD: 104438953/INET3980

BILL SENDER

TO COMPLIANCE UNIT
NYC TAXI & LIMOUSINE COMMISSION
31-00 47TH AVENUE
3RD FLOOR
LONG ISLAND CITY NY 11101

(718) 391-5501
REF. INV. PO.

DEPT.

552J11/22D/CAS

FedEx Ship Manager - Print Your Label(s)



FedEx Express



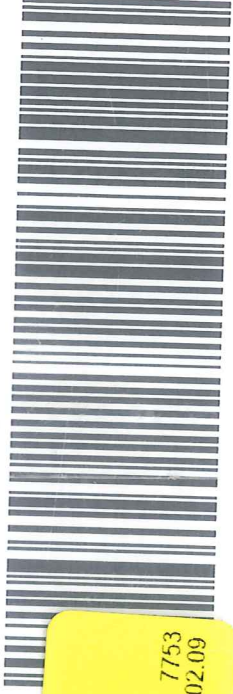
J181118012801uz

TRK# 7714 3554 7753

TUE - 13 FEB 4:30P
EXPRESS SAVER

ER AIVA

11101
NY-JS JFK



2/8/2018

Insert shipping document here.

FedEx[®] Express

Extremely Urgent

ORIGIN ID: FBTA
THOMAS AELLIS
1421 86TH STREET
BROOKLYN, NY 11228
UNITED STATES US

(718) 232-7273

SHIP DATE: 10FEB17
ACTWGT: 1.00 LB
CAD: 104438953/NET3850
BILL SENDER

TO COMPLIANCE UNIT
NYC TAXI & LIMOUSINE COMMISSION
31-00 47TH AVENUE
3RD FLOOR

LONG ISLAND CITY NY 11101

(718) 391-5501

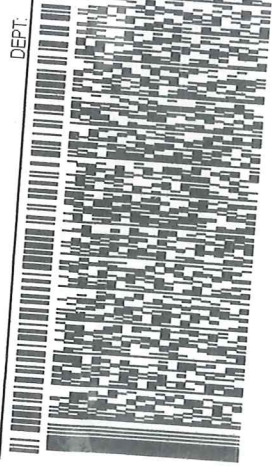
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INV:

PO:

DEPT:

FedEx[®] Express



TRK#

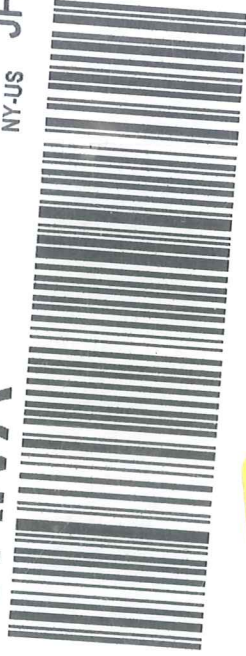
0201

7784 0169 4644

WED - 15 FEB 4:30P
EXPRESS SAVER

SE AIVA

11101
NY-US
JFK



WED

16:30

4644

02.14

FZ

Insert shipping
document here.