

FEDERAL MARITIME COMMISSION

DOCKET NO. 15-10

**REVOCATION OF OCEAN TRANSPORTATION INTERMEDIARY LICENSE
NO. 017843 – WASHINGTON MOVERS, INC.**

**BUREAU OF ENFORCEMENT'S RESPONSE TO EXHIBITS AND PRELIMINARY
FINDINGS OF FACT**

Following a status conference with the parties on March 23, 2016, Administrative Law Judge (ALJ) Guthridge issued his Exhibits And Preliminary Findings Of Fact (E&PFF) on March 25, 2016. In the E&PFF, ALJ Guthridge instructed each party to file and serve a statement indicating whether they stipulate to the preliminary findings of fact. The Bureau of Enforcement (BOE) stipulates to the preliminary findings of fact (PFF) with the following exceptions:

1. PFF 38 states:

The 2014 Annual Report prepared for Washington Movers by the SCC indicates that at the time the report was prepared prior to June 6, 2014, information on file with the SCC identified Norma Ghanem as an officer and director and Sajih Ghanem, Hanan Halabi, and Sandra Rodriguez as officers of Washington Movers. (BOE Ex. 4.)

BOE Ex. 4 is a copy of the document appearing on the website of the Virginia State Corporation Commission (SCC) as Washington Movers' 2014 Annual Report. It shows a signature date for Sam Ghanem of June 10, 2014, and a filing date with the Commonwealth of Virginia of June 12, 2014. (See date stamp in upper right corner of document.). The June

6 date in PFF 38 appears to be a typographical error. It should be corrected to state June 10, 2014.

2. PFF 39 states:

On June 6, 2014, Sam Ghanem signed the 2014 Annual Report for Washington Movers International, Inc., affirming that the information contained in the report is accurate and complete as of that date. (BOE Ex. 4.)

BOE Ex. 4 show a signature date for Sam Ghanem of June 10, 2014. The June 6 date in PFF 39 appears to be a typographical error for the reasons stated in paragraph 1 above and should also be corrected to June 10.

3. PFF 46 appears to be a duplicate of PFF 44 and should be deleted.

4. PFF 52 states:

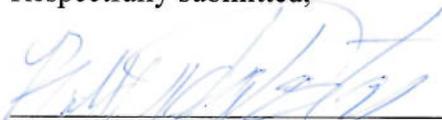
Washington Movers submitted the 2015 Annual Report to the Commonwealth of Virginia State Corporation Commission. (WM Ex. D.)

BOE submits that WM Ex. D does not support the fact of submission to the SCC, nor as to the timeliness of the 2015 Annual Report. Unlike the document identified and admitted as BOE Ex. 4, WM Ex. D does not show a SCC date stamp in the upper right corner of the document. The document found on the SCC's website as Washington Movers' 2015 Annual Report bears a date stamp in the upper right corner reflecting a filing date of February 16, 2016. A copy is attached hereto and submitted as BOE Ex. 9. While there do not appear to be any discrepancies in the content of the documents, BOE submits that the document on the SCC website should be part of the record in this proceeding to accurately reflect its filing date. BOE proposes that PFF 52 be revised as follows:

On February 16, 2016, Washington Movers filed its 2015 Annual Report with the Commonwealth of Virginia State Corporation Commission. (BOE Ex. 9.)

For the reasons stated above, BOE does not stipulate to PFFs 38, 39, 46, and 52. BOE does stipulate to all remaining preliminary findings of fact in the E&PFF.

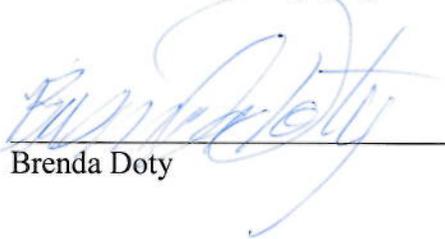
Respectfully submitted,



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Brian L. Troiaño, Deputy Director
Brenda Doty, Attorney
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Washington D.C. 20573-0001
(202) 523-5783
FAX (202) 523-5785
bdoty@fmc.gov

CERTIFICATE OF SERVICE

I hereby certify that on this **7th** day of April, 2016, a copy of the foregoing **Bureau of Enforcement's Response to Exhibits And Preliminary Findings Of Fact** has been served upon counsel for Respondent via email and by first class mail with postage prepaid.


Brenda Doty

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EXHIBIT 9

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION



215191544

1. CORPORATION NAME
Washington Movers International, Inc.

DUE DATE: 7/31/2015

SCC ID NO.: 0488838-8

2. VA REGISTERED AGENT NAME AND ADDRESS: OFFICER.

SAM R GHANEM
6714 FORSYTHIA ST
SPRINGFIELD VA 22150

5. STOCK INFORMATION:

CLASS	AUTHORIZED
COMMON	1,000

3. CITY OR COUNTY OF VA REGISTERED OFFICE:
129 - FAIRFAX COUNTY

4. STATE OR COUNTRY OF INCORPORATION:
VA - VIRGINIA

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE. Carefully read the enclosed instructions. Type or print in black only.

6. PRINCIPAL OFFICE ADDRESS:

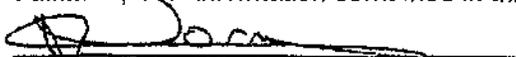
<input checked="" type="checkbox"/> Mark this box if address shown below is correct	If address is blank or incorrect, add or correct below.
ADDRESS: 6714 FORSYTHIA ST	ADDRESS:
CITY/ST/ZIP: SPRINGFIELD VA 22150	CITY/ST/ZIP:

7. DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed.
An individual may be designated as both a director and an officer.

Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete information	If information at lower left is incorrect or blank, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement
NAME: SAM GHANEM TITLE: P/T ADDRESS: 6714 FORSYTHIA ST CITY/ST/ZIP: SPRINGFIELD VA 22150	OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME: TITLE: ADDRESS: CITY/ST/ZIP:

I affirm that the information contained in this report is accurate and complete as of the date below.


SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

Norma Ghahem
PRINTED NAME AND TITLE

11-20-15
DATE

It is a Class 1 misdemeanor for any person to sign a document that is false in any material respect with intent that the document be delivered to the Commission for filing.

CIS0360

2015 ANNUAL REPORT CONTINUED

CORPORATE NAME:
Washington Movers International, Inc.

DUE DATE: 7/31/2015
SCC ID NO.: 0468838-8

7. DIRECTORS AND PRINCIPAL OFFICERS (continued):

All directors and principal officers must be listed.
An individual may be designated as both a director and an officer.

Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input checked="" type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information	If information at lower left is incorrect or blank, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Replacement
<p>OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/></p> <p>NAME: NORMA GHANEM</p> <p>TITLE: OFFICE MNGR</p> <p>ADDRESS: 6714 FORSYTHIS ST</p> <p>CITY/ST/ZIP: SPRINGFIELD VA 22150</p>	<p>OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/></p> <p>NAME: Norma Ghanem</p> <p>TITLE: President/ Secretary/ Treasurer</p> <p>ADDRESS: 6714 Forsythia Street</p> <p>CITY/ST/ZIP: Springfield, VA 22150</p>
<p>Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete information</p> <p>OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME: SONIA KAOVECH</p> <p>TITLE: EXPORT MANAGER</p> <p>ADDRESS: 12764 WOOD HOLLOW DRIVE APT 1525</p> <p>CITY/ST/ZIP: WOODBRIDGE VA 22192</p>	<p>OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME:</p> <p>TITLE:</p> <p>ADDRESS:</p> <p>CITY/ST/ZIP:</p>
<p>Mark appropriate box unless area below is blank: <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information</p> <p>OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME: SANDRA RODRIGUEZ</p> <p>TITLE: ACCOUNTING</p> <p>ADDRESS: 2404 LADYMEADE DR</p> <p>CITY/ST/ZIP: SILVER SPRING MD 20906</p>	<p>OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME:</p> <p>TITLE:</p> <p>ADDRESS:</p> <p>CITY/ST/ZIP:</p>
<p>Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information</p> <p>OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME:</p> <p>TITLE:</p> <p>ADDRESS:</p> <p>CITY/ST/ZIP:</p>	<p>OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME:</p> <p>TITLE:</p> <p>ADDRESS:</p> <p>CITY/ST/ZIP:</p>