



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Foreign Business Corp  
Annual Report - Amended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

**This form is only to be used to amend the current annual report on file with this office.**

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000148984

2. Name of Corporation Niagara Credit Solutions, Inc.

3. Street Address Principal Business Office:

No. and Street: 1212 ABBOTT RD, SUITE D

City or Town: LACKAWANNA

State: NY Zip: 14218 Country: USA

5. State of Incorporation

State: NY

6. Brief Description of the Character of Business Conducted in Rhode Island

COLLECTION AGENCY

7. Names and Addresses of the Officers and Directors:

**All officers and directors must be listed.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	GARY E BLUM	420 LAWRENCE BELL DRIVE, SUITE # 2 WILLIAMSVILLE, NY 14221 USA
TREASURER	GARY E BLUM	420 LAWRENCE BELL DRIVE, SUITE #2 WILLIAMSVILLE, NY 14221-7820 USA
SECRETARY	RICHARD A NEIL	420 LAWRENCE BELL DRIVE, SUITE #2 WILLIAMSVILLE, NY 14221-7820 USA
VICE PRESIDENT	RICHARD A NEIL	420 LAWRENCE BELL DRIVE, SUITE #2 WILLIAMSVILLE, NY 14221 USA
DIRECTOR	RICHARD A NEIL	420 LAWRENCE BELL DRIVE, SUITE #2 WILLIAMSVILLE, NY 14221-7820 USA
DIRECTOR	GARY E BLUM	420 LAWRENCE BELL DRIVE, SUITE #2 WILLIAMSVILLE, NY 14221-7820 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$1.0000	20,000.00	6000

**9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.**

**Signed this 31 Day of October, 2016 at 11:19:42 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By GARY E BLUM  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea  
*Secretary of State*

