	State of Rhode Office of the Secreta		No Fee				
Division Of Business Services							
148 W. River Street							
1.00	Providence RI 029						
1030	(401) 222-30	40					
Foreign Business Corp Annual Report - Amended							
Filing Period: February 1 - May							
In accordance with R I G I 7-1	2-1501(e) each corporation	n failing or re	fusina to				
In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law							
(R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.							
This form is only to be	This form is only to be used to amend the current annual report on file with this office.						
ANNUAL REPORT YEAR: <u>2024</u>							
1. Corporate ID No. 001744928							
2. Name of Corporation <u>KOV</u>	2. Name of Corporation <u>KOVO CREDIT INC.</u>						
3. Street Address Principal E	Business Office:						
No. and Street: <u>101 CONV</u>	ENTION CENTER DR.						
<u>SUITE 370</u>	-						
City or Town: <u>LAS VEGA</u>	<u>S</u>	State: <u>NV</u>	Zip: <u>89109</u> Country: <u>USA</u>				
5. State of Incorporation							
State: <u>DE</u>							
	NAICS CODE						
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.							
<u>522390</u>	<u>522390</u>						
6. Brief Description of the Character of Business Conducted in Rhode Island							
CREDIT INTERMEDIATION							
7. Names and Addresses of the Officers and Directors:							
All officers and directors must be listed.							
Title	Individual Name First, Middle, Last, Suffix	Address, C	Address ity or Town, State, Zip Code, Country				
,			i				
1							

PRESIDENT	NIMIT JAIN	9450 SW GEMINI DR SUITE 87907 BEAVERTON, OR 97008 USA	
VICE PRESIDENT	CHARLES LI	9450 SW GEMINI DR SUITE 87907 BEAVERTON, OR 97008 USA	
DIRECTOR	CHARLES LI	9450 SW GEMINI DR SUITE 87907 BEAVERTON, OR 97008 USA	
DIRECTOR	NIMIT JAIN	9450 SW GEMINI DR SUITE 87907 BEAVERTON, OR 97008 USA	

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	Shares
CWP		\$0.0010	100.00	100

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 26 Day of April, 2024 at 1:14:49 PM. *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 <u>NIMIT JAIN</u>

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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