					REC '25 Mi		
State of Phode Island					•	<u> </u>	
State of Rhode Island Department of State - Business Services Divi					-170 -2 G		
Annual Report for the year: 2024				Division 41003 850 .			
Filing period: February 1 - May 1 Filing Fee: \$50.00				第6 月 .			
Penalty: Additional \$25.00 1. Entity ID Number	fee if form is n	ot filed by May 31.			<u> </u>		
· ·	2. Exact nam	e of the Corporatio	h ا م				
DOIT-36768 3. Principal Office Address	Con	tvin keal	The lor	L	State	- T-91-	
1076 Park Ave	2		Cn	inston	PI	21p 0246	
4. NAICS Code		ription of the charac	ter of busine	ess conducted in F		- IN	
53 Llo 5. State of Incorporation		Estare B	roker				
7. List ALL officers (names and ad President Name	dresses)		Turin n	Chec	k the box to indicate ar	n attachment 🗆	
ZHIYU DIN	Vice-President Name						
Street Address 1576 Purk suc			Street Address				
City Cram store	State AZ	Day/o	City		State	Zip	
Secretary Name	<u> </u>		Treasure:	Name			
Street Address			Street Address				
City	State	Zip	City		State	Zip	
8. List ALL directors (names and a	dresses)		<u> </u>	Chacl	k the box to indicate ar		
Director Name			Director N	/ame	k the box to indicate at	i attacriment [_]	
Street Address			Street Address				
City	State	Zip	City	-			
Director Name					State	Zip	
Olector Manie			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
9. Shares Authorized	<u> </u>	10. Shares Issu	ed	Chast	k the haute indiana		
This information is currently of recor Department of State.	d in the	NUMBER OF		CLAS	k the box to indicate ar systems	PAR VALUE	
Changes require an additional filing.	÷						
11. This report must be executed or ceiver or trustee, this report must be Under penalty of periusy I declar	s executed on t	lenali ni ino comor:	אמי עם מסוונ	FORGSIOF OF INICIAL			
Under penalty of perjury, I declar statements, and that all statemen	us comainea r	eri nave examine Derein are true and		rt, including any a FILED	accompanying sched	lules and	
Name of Authorized Representative					Date		
241 Yu DIN				3/5/2	-}		
Signature of Authorized Representative			MAR	0 7 2025	1 -1 5	-	
			FG	ル十ぴ			
HAIL TO							
Division of Business Services 48 W. River Street, Providence, Rhode Phone: (401) 222-3040	Island 02904-261	5	1004	ķ	1		

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov