



**State of Rhode Island
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**

Filing Period: February 1 - May 1

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 used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2025

1. Corporate ID No. 001767605

2. Name of Corporation Innovation Labs Limited

3. Street Address Principal Business Office:

No. and Street: @GIG BEACH
TRIQ ID-DRAGUNARA

City or Town: ST JULIANS State: Zip: STJ3148 Country: MLT

5. State of Incorporation

State:

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

713290

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

PROVIDE AFFILIATE MARKETING SERVICES TO GAMING OPERATORS

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	JONAS WARRER	NORGMESTER JORGENSENS VEJ 10 KLAMPENBO 2930 DNK
SECRETARY	RYAN CASALETTO	DOM MAWRU INGUANEZ BIRKIRKARA STJ 3148 MLT
DIRECTOR	JONAS WARRER	BORGMESTER JORGENSENS VEJ 10 KLAMPENBORG DNK
DIRECTOR	RYAN CASALETTO	DOM MAWRU INGUANEZ BIRKIRKARA MLT

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	B	\$1.0000	1.00	0
CWP	A	\$1.0000	1,199.00	0

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 21 Day of April, 2025 at 1:56:21 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 W. RAYMOND FELTON

Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

© 2007 - 2025 State of Rhode Island
All Rights Reserved