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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: 2024

1. Corporate ID No. <u>001744928</u>

- 2. Name of Corporation KOVO CREDIT INC.
- 3. Street Address Principal Business Office:

No. and Street: 101 CONVENTION CENTER DR.

SUITE 370

City or Town: <u>LAS VEGAS</u> State: <u>NV</u> Zip: <u>89109</u> Country: <u>USA</u>

5. State of Incorporation

State: DE

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>

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	Address		
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country		

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 Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of 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 NIMIT JAIN

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island, 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:

April 26, 2024 01:14 PM

Gregg M. Amore

Tregs M. Coure

Secretary of State

