

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000000588

Entity Name: LUGANO DIAMONDS & JEWELRY INC.**Current Principal Place of Business:**620 NEWPORT CENTER DR
SUITE 800
NEWPORT BEACH, CA 92660**Current Mailing Address:**620 NEWPORT CENTER DR
SUITE 800
NEWPORT BEACH, CA 92660 US**FEI Number:** 57-1216784**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DIRECTOR
Name	ARNOLD, DAVID
Address	620 NEWPORT CENTER DR SUITE 800
City-State-Zip:	NEWPORT BEACH CA 92660

Title	DIRECTOR
Name	CUMENAL, FREDERIC
Address	620 NEWPORT CENTER DR SUITE 800
City-State-Zip:	NEWPORT BEACH CA 92660

Title	VP, CFO
Name	MCGREE, MIKE
Address	620 NEWPORT CENTER DR SUITE 800
City-State-Zip:	NEWPORT BEACH CA 92660

Title	PRESIDENT, DIRECTOR, CEO
Name	FERDER, MORDECHAI HAIM
Address	620 NEWPORT CENTER DR SUITE 800
City-State-Zip:	NEWPORT BEACH CA 92660

Title	DIRECTOR
Name	MACIARIELLO, PAT
Address	620 NEWPORT CENTER DR SUITE 800
City-State-Zip:	NEWPORT BEACH CA 92660

Title	SECRETARY, DIRECTOR
Name	DALAL, RAJ
Address	620 NEWPORT CENTER DR SUITE 800
City-State-Zip:	NEWPORT BEACH CA 92660

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MIKE MCGREE**CHIEF FINANCIAL
OFFICER****03/16/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date