

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000003823

Entity Name: FASHION POZE PRODUCTIONS INC**Current Principal Place of Business:**1216 MAJESTY TERRACE
WESTON, FL 33327**Current Mailing Address:**1216 MAJESTY TERRACE
WESTON, FL 33327 US**FEI Number:** 45-5257851**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**AIKMAN, TANIA
1216 MAJESTY TERRACE
WESTON, FL 33327 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 CEO, EXECUTIVE DIRECTOR
Name AIKMAN, TANIA
Address 1216 MAJESTY TERRACE
City-State-Zip: WESTON FL 33327

Title P
Name AIKMAN, TANIA
Address 1216 MAJESTY TERR
City-State-Zip: WESTON FL 33027

Title VP
Name SNELL, SCOTT
Address 120 ARLINGTON DR
City-State-Zip: JOHNSON CITY TN 37601

Title CFO
Name MIMS-SHAW, RENEE
Address 4401 NW 41ST ST
City-State-Zip: LAUDERDALE LAKES FL 33319

Title CREATIVE DIRECTOR
Name FLETCHER, ASHLEY
Address 1216 MAJESTY TERRACE
City-State-Zip: WESTON FL 33327

Title CASTING DIRECTOR
Name LU, KATHY
Address 9511 FONTAINEBLEAU BLVD
317
City-State-Zip: MIAMI FL 33172

Title WARDROBE MANAGER
Name HALL, LATASHA
Address 86 PHELAND STREET
City-State-Zip: SPRINGFIELD MA 01109

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TANIA AIKMAN**PRESIDENT****05/29/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date