

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000005504

**Entity Name:** EAGLE CARE PRODUCTIONS, INC.

**Current Principal Place of Business:**

4601 NW 183RD STREET, SUITE F-12  
MIAMI GARDENS, FL 33055

**Current Mailing Address:**

4601 NW 183RD STREET, SUITE F-12  
MIAMI GARDENS, FL 33055

**FEI Number:** 37-1785239

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MCINTYRE, MAREETA  
4601 NW 183RD STREET, SUITE F-12  
MIAMI GARDENS, FL 33055 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:** MAREETA MCINTYRE

04/29/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PTD	Title	VP
Name	MCINTYRE, MAREETA	Name	REID-MASON, DARLEAN
Address	4601 NW 183RD STREET, SUITE F-12	Address	4601 NW 183RD STREET, SUITE F-12
City-State-Zip:	MIAMI GARDENS FL 33055	City-State-Zip:	MIAMI GARDENS FL 33055
Title	D		
Name	MCINTYRE, GAIL		
Address	4601 NW 183RD STREET, SUITE F-12		
City-State-Zip:	MIAMI GARDENS FL 33055		

*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:** MAREETA MCINTYRE

CEO

04/29/2021

Electronic Signature of Signing Officer/Director Detail

Date