PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P99000013807

1. Corporation Name

THE BIG PICTURE, INC.

FILLU DELRETARY OF STATE

00 OCT 13 PM 12: 44

Principal Pla	ace of Business	Mailing Address	Mailing Address					
5958 BAY 1	HILLOHICLE	5958 BAY HILL	5958 BAY HILL WHICLE					
LAKE WORTH FL 33463			LAKE WORTH FL 33463			(1 1811) (5 11) (811) (611) (611) (71) (71)		
•		,			MEID	ICTATEMENT		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					REINSTATEMENT <u>OO</u>			
	ncipal Office Address, If Applicable		3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified		
Suite, Apt. 1	#, etc.	Suite, Apt. #, et	Suite, Apt. #, etc.			02/11/1999		
City & State		Suite State	Suire 8			Applied For Not Applied For Not Applied For		
BOCA	RATON, FLORIDA	· Pincia 12.4	Brow RATON . PLOPIDA					
عرور الإ	187 PACM BOOK	h 3348	33487 PACM BEACH			6. CERTIFICATE OF STATUS DESIRED for a Certificate of Status		
7. Names a	and Street Addresses of Each Officer at	d/or Director (Florid	a nonprofit o					
Title(s) 1	Name of Officers and/or Directors 2		3	Street Address of Each Officer and/or Directo		City / State / Zip		
PTD	NICHOLAS, MELISSA	5958-BAY-HILL-CIRCLE			LAKE WORTH FL 83403			
PTD NICHOLAS, MELISSA			1140 HOLLAND DRIVE SUITE 8			BOCA PATON, FL. 32	3487	
				1 - ***	e			
				<u>. </u>	4 1	4000034342945		
					e e i i	71033700-01	.005=~054 ****750.00	
	8. Name and Address of Curre	nt 9. Name			nd Address of New Registered Agent			
NICHOLAS, MELISSA 5958 BAY HILL CIRCLE LAKE WORTH FL 33463				Name MELISSA NICHOLAS Street Address (P.O. Box Number is Not Acceptable) 1140 HOLLAND DEIVE Suite, Apt. #, Etc. SUITE 8 City BOCA RATON State Zip Code FL 33487				
10. I, being	appointed the registered agent of the a	bove named corpora	tion, am farr				37 <i>0 </i>	
Signature o		TURE	REC	SERVINO		Date 10/12/07)	
		REGISTERED AGEN	NT MUST SI	GN				
	that I am an officer or director or the restatement application, the reason for di							

owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.