

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P99000013807**

1. Entity Name

**The Big Picture Inc**

**FILED**

02 SEP 25 PM 1:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**1140 Holland Dr**

Suite, Apt. #, etc.

**Suite 8**

3. Mailing Address

**SAME N/A**

Suite, Apt. #, etc.

City & State

**Boca Raton FL 33487**

City & State

Zip

**33487**

Country

**USA**

Zip

Country

4. FEI Number

**65-090-1265**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

**Michael T Lehmann**

Street Address (P.O. Box Number is Not Acceptable)

**1140 HOLLAND DRIVE**

**Suite 8**

City

**Boca Raton**

**FL**

Zip Code

**33487**

8. 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



Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**Make Check Payable to Department of State**

10. Election Campaign Financing

Trust Fund Contribution.

☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**President  
Michael T Lehmann  
1140 Holland Drive  
Suite 8, Boca Raton, FL 33487**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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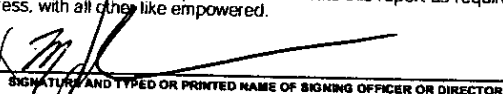
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9-24-02**

Date

Daytime Phone #

CR2E034B (12/01)

Dept. of State  
Division of Corporations  
409 East Gaines St  
Tallahassee, FL 32399  
Attention: Michelle Mulligan

September, 24, 2002

Dear Michelle,

As per our conversation today I am over night mailing to you, another UBR Report and copies of all the others I mailed to The Department of State in regards to our renewal. Please note the original report and payment was in fact sent by the due date. Our payment was received by the state and cashed. We never received the rejected report back. I do not believe we should be liable for any penalties in regards to this filing. When it was brought to our attention by one of our creditors that we were never renewed. I resent a UBR report at that time which apparently still has not been processed. So I am over night mailing this one today to your attention. Please process this report and correct our status. Thanks so much for your help.

Sincerely,

*Melinda Mergen*  
Melinda Mergen  
Comptroller

*Mike T. Lehmann*  
Mike T. Lehmann  
President