2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000007933

SCANDAR, JOHN

2135 DE LA MONTAGNE

MONTREAL, QC H3G1Z8,

Name:

Address: City-St-Zip:

Entity Name: FULLSCOPE, INC. OF AL

FILED Dec 17, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 317 W MARKET ST ATHENS, AL 35611 **Current Mailing Address: New Mailing Address:** 317 W MARKET ST ATHENS, AL 35611 FEI Number: 38-3479107 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: MARY R. ADAMS Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CARTER, JOHN F Name: Name: 317 W MARKET ST Address: Address: City-St-Zip: ATHENS, AL 35611 City-St-Zip: Title: Title: () Delete () Change () Addition Name: EARTHMAN, WILLIAM Name: 4409 SHEPPARD PL Address: Address: NASHVILLE, TN 37206 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition WEBBER, KEVIN Name: Name: 604 ADAMS ST Address: Address: City-St-Zip: HUNTSVILLE, AL 35801 City-St-Zip: Title: **PCEO** () Delete Title: () Change () Addition SMITH, RUSSELL L Name: Name: Address: 317 W MARKET ST Address: City-St-Zip: ATHENS, AL 35611 City-St-Zip: Title: ΕV Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: MELISSA W. DEAN AMGR 12/17/2007