

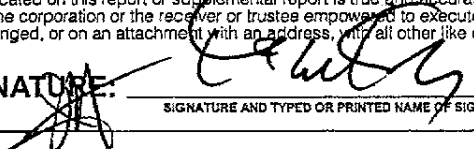


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2006 08:00 AM
Secretary of State

DOCUMENT # 824230			
1. Entity Name OVPI, INC.			
Principal Place of Business 2911 TURTLE CREEK BLVD, #500 LB 513 DALLAS, TX 75219		Mailing Address 2911 TURTLE CREEK BLVD, #500 LB 513 DALLAS, TX 75219	
DO NOT WRITE IN THIS SPACE			
			
		04132006 No Chg-P CR2E034 (11/05)	
4. FEI Number 75-1214747		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		DO NOT WRITE IN THIS SPACE	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-stating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		1000000533227 05/06/06-80115-024 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST KENNEDY, KEITH W 2911 TURTLE CREEK BLVD., #500 DALLAS, TX 75219	DO NOT WRITE IN THIS SPACE	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Keith W. Kennedy P/S/T 4/13/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	