

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P01000009477

1. Corporation Name

DoDa Ventures, Inc.

2. Principal Office Address 654 W. Brandon Blvd		3. Mailing Office Address 654 W. Brandon Blvd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Brandon, FL		City & State Brandon, FL	
Zip 33511	Country USA	Zip 33511	Country USA

REINSTATEMENT 03

4. Date Incorporated or Qualified To Do Business in Florida	1/25/01
5. FEI Number 593698411	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$675 <small>for a Standard Fee application for a Certificate of Status</small>	

7. Name and Address of Current Registered Agent

Name
Don Griffin

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

21127 Lake Vienna Drive

2000024229102
10/31/03-01025-007 ***150.00

Suite, Apt. #, Etc.

City
Land O' Lakes

State
FL Zip Code
34639

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Date
10/28/03

REGISTERED AGENT MUST SIGN

CR3631-HB02

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Don Griffin	21127 Lake Vienna Drive	Land O' Lakes, FL 34639
VP	Dawn Griffin	21127 Lake Vienna Drive	Land O' Lakes, FL 34639

DRW

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees 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)(b), 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.

SIGNATURE:

Don G Don Griffin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/28/03 813-494-4095

Date

Daytime Phone #

**DoDa Ventures, Inc.
654 W. Brandon Blvd
Brandon, FL 33511**

October 24, 2003

Department of State
Department of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Document # P01000009477

To whom it may concern:

It has come to my attention that you have placed DoDa Ventures, Inc. on your inactive list due to failure to file an Annual Report. On October 2, 2002 I requested and was granted a change of address for DoDa Ventures. The change was made only to the "Primary Address" and not to the "Mailing Address" as well. Due to the fact that I relocated and never received notice to file an Annual Report, I am requesting a waiver of the Corporation Reinstatement fee.

I have included the Corporation Reinstatement form and my check for \$150.00 as directed by your staff

If you should have any question concerning this matter, please contact me at 813-494-4095. I thank you in advance for your help.

Sincerely,



Don Griffin

President

DoDa Ventures, Inc.
654 W. Brandon Blvd
Brandon, FL 33511
813-494-4095
E-mail: don@do-daventures.com