

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90120 020 ***158.75

DOCUMENT # P98000095036

1. Corporation Name
DINNERFORTWO.COM, INC.



Principal Place of Business

592 MASALO PLACE
LAKE MARY FL 32746

Mailing Address

592 MASALO PLACE
LAKE MARY FL 32746

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1998

4. FEI Number

59-3541750

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes ☐ No ☒

2. Principal Place of Business

2a. Mailing Address

21 9124 Summit Centre Way
Suite, Apt. #, etc. #9308

26 9124 Summit Centre Way
Suite, Apt. #, etc. #9308

22 City & State
Orlando, Florida

27 City & State
Orlando, Florida

23 Zip
32810

28 Zip
32810

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAMBRIGHT, RANDALL A
592 MASALO PLACE
LAKE MARY FL 32746

81 Name

Randall A. Lambright

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

9124 Summit Centre Way

83

#9308

84 City

Orlando

FL

85 Zip Code
32810

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Randall A. Lambright

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/21/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME LAMBRIGHT, RANDALL A
STREET ADDRESS 592 MASALO PLACE
CITY-ST-ZIP LAKE MARY FL 32746

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME Lambright, Randall A.
1.3 STREET ADDRESS 9124 Summit Centre Way #9308
1.4 CITY-ST-ZIP Orlando, Florida 32810

TITLE D ☐ DELETE
NAME BUTLER, GEORGE J
STREET ADDRESS 592 MASALO PLACE
CITY-ST-ZIP LAKE MARY FL 32746

2.1 TITLE D ☒ Change ☐ Addition
2.2 NAME Butler, George J.
2.3 STREET ADDRESS 9124 Summit Centre Way #9308
2.4 CITY-ST-ZIP Orlando, Florida 32810

TITLE D ☐ DELETE
NAME OSBORNE, LISA F
STREET ADDRESS 1122 EAST PIKE ST., #1265
CITY-ST-ZIP SEATTLE WA 98122

3.1 TITLE D ☒ Change ☐ Addition
3.2 NAME Osborne, Lisa F.
3.3 STREET ADDRESS 9124 Summit Centre Way #9308
3.4 CITY-ST-ZIP Orlando, Florida 32810

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with a different like empowered.

SIGNATURE: Randall A. Lambright

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

4/21/99

DAYTIME PHONE #

407-513-6114

CR2E034 (11/98)