


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2007 8:00 am
Secretary of State

02-27-2007 90001 033 ***150.00

DOCUMENT # F02000000458	
1. Entity Name WATSON PARTY TABLES INC.	

Principal Place of Business 1861 NORTH FEDERAL HIGHWAY SUITE 228 HOLLYWOOD, FL 33020 US	Mailing Address 2455 S. ALSTON AVE DURHAM, NC 27713 US
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40025171



02142007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 56-1815129	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WATSON-VITALE, SHAY
1861 NORTH FEDERAL HIGHWAY
SUITE 228
HOLLYWOOD, FL 33020**

**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 *Shay Watson Vitale* *Shay Watson Vitale* *2-21-07*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WATSON, MICHAEL S 1300 BROOKS AVENUE RALEIGH, NC 27607
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V WATSON, RONNIE 28102 GOODMAN ROAD GOLD HILL, NC 28071
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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: *Ronnie Watson* *Ronnie L. Watson* *2-21-07*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #