

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 28, 2008 08:00 AM**  
**Secretary of State**

**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**



02052008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**56-1815129**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

**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**

**2-12-08**

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**000000842251  
03/11/08-80023-012 150.00**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	WATSON, MICHAEL S
STREET ADDRESS	1300 BROOKS AVENUE
CITY- ST- ZIP	RALEIGH, NC 27607
TITLE	V
NAME	WATSON, RONNIE
STREET ADDRESS	28102 GOODMAN ROAD
CITY- ST- ZIP	GOLD HILL, NC 28071
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**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*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-12-08**

Date

Daytime Phone #