


**2007 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P00000067741

1. Entity Name
MONCHEESE PIZZA CORP.



40119912



Principal Place of Business Mailing Address
9459 HARDING AVENUE **18325 NW 61 AVENUE**
SURFSIDE, FL 33154 **MIAMI LAKES, FL 33015**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

06012007 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
65-1025196 Not Applicable

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

6. Name and Address of Current Registered Agent
LEY, RAMONA F
18325 NW 61 ST AVENUE
MIAMI LAKES, FL 33015

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!! FEE IS \$550.00
Due by September 14, 2007

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	PSD LEY, RAMONA F 18325 NW 61ST AVENUE MIAMI LAKES, FL 33015	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO LEY, LORENA 12512 SW 53 STREET HOLLYWOOD, FL 33027	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO LEY, LORENA 18325 NW 61 AVE Miami Lakes, FL 33015	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Carmy de Ley* 6/11/07 305-527-5927
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
40119912

MONCHEESE PIZZA CORP.

Ramona Francisca Ley
18325 NW 61ST Ave
Miami Lakes, FL 33015

FLORIDA DEPARTMENT OF STATE
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
Attn: Annual Report Division

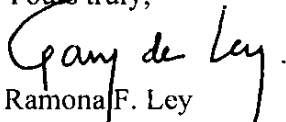
June 1, 2007

To Whom It May Concern:

With the present letter, I would like to explain the reason why I am sending payment for Annual Report Renewal for Moncheese Pizza Corp. (Document ID # P000000-67741) at this time. I originally submitted 2007 Annual Report Renewal back in February 2007, but I checked in your records that you never received the letter. I assumed the Postal Service system failed to deliver my letter since the check never cleared. With all respect, I would like to ask you to please accept my payment of renewal and waive the late fees for this time.

If you need a confirmation of any of these statements, please do not hesitate to contact me at 305-527-5927. Thank you in advance for your cooperation.

Yours truly,



Ramona F. Ley
President