

P94000067562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

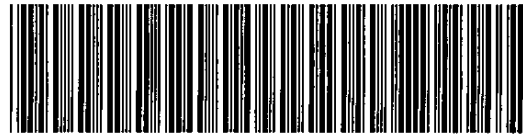
(Business Entity Name)

(Document Number)

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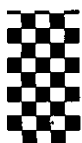


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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Wigs for You of Adventura, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P94000067562

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Blanca Schoonover  
(Name of Person)

Wigs for You of Adventura, Inc.  
(Name of Firm/Company)

3500 W Hallandale Beach Blvd.  
(Address)

Pembroke Park, FL 33023  
(City/State and Zip Code)

For further information concerning this matter, please call:

Blanca Schoonover at ( 954 ) 963-9680  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Richard Schoonover, hereby resign as President, Treasurer & Director  
(Title)

of Wigs for You of Adventura, Inc.

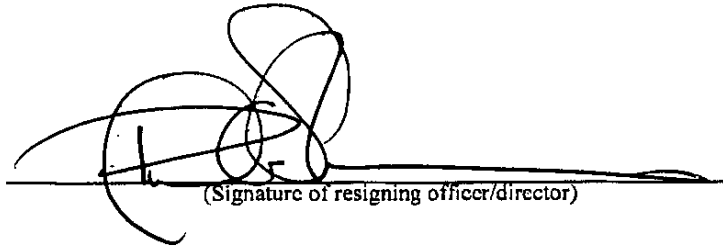
(Name of Corporation)

P94000067562

(Document Number, if known)

a corporation organized under the laws of the State of

Florida



(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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