

## FORMULARIO SC

**Nº 500039551**

|    |                                        |  |                |  |  |            |           |  |       |  |    |                           |           |  |  |  |    |                       |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
|----|----------------------------------------|--|----------------|--|--|------------|-----------|--|-------|--|----|---------------------------|-----------|--|--|--|----|-----------------------|-----------|--|--|----|------------|--|--|--|--|--|--|--|--|--|
| 01 | RAZÓN O DENOMINACIÓN SOCIAL            |  |                |  |  |            |           |  |       |  | 02 | RUC                       |           |  |  |  |    |                       |           |  |  | 03 | EXPEDIENTE |  |  |  |  |  |  |  |  |  |
|    | EDUMARTH CORP S.A                      |  |                |  |  |            |           |  |       |  |    | 0 9 9 2 3 5 6 0 3 0 0 0 1 |           |  |  |  |    |                       |           |  |  |    | 1 15055    |  |  |  |  |  |  |  |  |  |
| 04 | PROVINCIA                              |  |                |  |  | 05         | CANTÓN    |  |       |  |    | 06                        | CIUDAD    |  |  |  |    | 07                    | PARROQUIA |  |  |    |            |  |  |  |  |  |  |  |  |  |
|    | GUAYAS                                 |  |                |  |  |            | GUAYAQUIL |  |       |  |    |                           | GUAYAQUIL |  |  |  |    |                       | TARQUI    |  |  |    |            |  |  |  |  |  |  |  |  |  |
| 08 | CALLE                                  |  |                |  |  |            |           |  |       |  | 09 | NÚMERO                    |           |  |  |  | 10 | TELÉFONO:             |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
|    | ALBORADA PRIMERA ETAPA                 |  |                |  |  |            |           |  |       |  |    |                           |           |  |  |  |    | 0 7 2 9 6 7 4 3 3     |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
|    |                                        |  |                |  |  |            |           |  |       |  |    |                           |           |  |  |  |    | FAX:                  |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
| 11 | INTERSECCIÓN                           |  |                |  |  |            |           |  |       |  | 12 | EDIFICIO C. COMERCIAL     |           |  |  |  | 13 | PISO, DEPTO., OFICINA |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
|    | ACTIVIDAD DE TERCERIZACIÓN DE PERSONAL |  |                |  |  |            |           |  |       |  |    |                           |           |  |  |  |    |                       |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
| 14 | ACTIVIDAD ECONÓMICA PRINCIPAL          |  |                |  |  |            |           |  |       |  | 15 | CÓD. ACTIV.               |           |  |  |  | 16 | EMAIL                 |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
|    |                                        |  |                |  |  |            |           |  |       |  |    |                           |           |  |  |  |    |                       |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
| 17 | REPRESENTANTE LEGAL                    |  |                |  |  |            |           |  |       |  | 18 | CÉDULA                    |           |  |  |  | 19 | CARGO                 |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
|    | MARTHA EDITH AGUILAR CABRERA           |  |                |  |  |            |           |  |       |  |    | 0 7 0 1 0 8 0 5 1 7       |           |  |  |  |    | GERENTE GENERAL       |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
| 20 | PERSONAL OCUPADO                       |  |                |  |  |            |           |  |       |  | 21 | AUDITOR EXTERNO           |           |  |  |  |    | R.N.A.E.              |           |  |  |    |            |  |  |  |  |  |  |  |  |  |
|    | DIRECCIÓN                              |  | ADMINISTRACIÓN |  |  | PRODUCCIÓN |           |  | OTROS |  |    |                           |           |  |  |  |    |                       |           |  |  |    |            |  |  |  |  |  |  |  |  |  |

[illegible]

|       |        |
|-------|--------|
| TOTAL | 800.00 |
|-------|--------|

NOTA: EL PRESENTE FORMULARIO NO SE ACEPTARÁ CON ENMENDADURAS O TACHONES

FECHA DE PRESENTACIÓN

| AÑO |   |   |   | MES |   | DÍA |   |
|-----|---|---|---|-----|---|-----|---|
| 2   | 0 | 0 | 6 | 0   | 4 | 2   | 8 |

**ORIGINAL: SUPERINTENDENCIA DE COMPAÑÍAS**  
POLIGRÁFICA C.A. - Resolución: 0231 - 27 / 03 / 02

FIRMA DEL REPRESENTANTE NEGAL

28 ABR 2006

Superintendencia de Compañías