

**No. 60 0003668**

## FORMULARIO ÚNICO DE ACTUALIZACIÓN

|    |  |                                           |  |    |     |                |  |    |  |            |  |    |  |                       |  |    |            |           |  |   |  |   |  |          |  |                       |  |    |  |           |  |   |  |  |  |  |  |  |  |
|----|--|-------------------------------------------|--|----|-----|----------------|--|----|--|------------|--|----|--|-----------------------|--|----|------------|-----------|--|---|--|---|--|----------|--|-----------------------|--|----|--|-----------|--|---|--|--|--|--|--|--|--|
| 01 |  | RAZÓN O DENOMINACIÓN SOCIAL               |  | 02 | RUC | 0992401931001  |  |    |  |            |  |    |  |                       |  | 03 | EXPEDIENTE | 118967    |  |   |  |   |  |          |  |                       |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 01 |  | CONSULTORIA HUMANA ECUADOR C. LTDA. COHUE |  |    |     |                |  |    |  |            |  |    |  |                       |  |    |            |           |  |   |  |   |  |          |  |                       |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 04 |  | PROVINCIA                                 |  | 05 |     | CANTÓN         |  | 06 |  |            |  |    |  |                       |  |    |            | CIUDAD    |  |   |  |   |  |          |  |                       |  | 07 |  | PARROQUIA |  |   |  |  |  |  |  |  |  |
| 04 |  | GUAYAS                                    |  | 05 |     | GUAYAQUIL      |  | 06 |  |            |  |    |  |                       |  |    |            | GUAYAQUIL |  |   |  |   |  |          |  |                       |  | 07 |  | TARQUI    |  |   |  |  |  |  |  |  |  |
| 08 |  | CALLE                                     |  |    |     |                |  |    |  |            |  | 09 |  | NÚMERO                |  | 10 |            | TELÉFONO: |  | 2 |  | 6 |  | 8        |  | 7                     |  | 6  |  | 8         |  | 9 |  |  |  |  |  |  |  |
| 08 |  | AV. MIGUEL H. ALCIVAR                     |  |    |     |                |  |    |  |            |  | 09 |  | 506                   |  | 10 |            | FAX:      |  |   |  |   |  |          |  |                       |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 11 |  | INTERSECCIÓN                              |  |    |     |                |  |    |  |            |  | 12 |  | EDIFICIO C. COMERCIAL |  |    |            |           |  |   |  |   |  | 13       |  | PISO, DEPTO., OFICINA |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 11 |  | VICTOR H. SICOURET                        |  |    |     |                |  |    |  |            |  | 12 |  |                       |  |    |            |           |  |   |  |   |  | 13       |  | 3P. OF. 305           |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 14 |  | ACTIVIDAD ECONÓMICA PRINCIPAL             |  |    |     |                |  |    |  |            |  | 15 |  | CÓD. ACTIV.           |  | 16 |            | EMAIL     |  |   |  |   |  |          |  |                       |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 14 |  | CONSULTORIA HUMANA Y SICOLOGICA           |  |    |     |                |  |    |  |            |  | 15 |  |                       |  | 16 |            |           |  |   |  |   |  |          |  |                       |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 17 |  | REPRESENTANTE LEGAL                       |  |    |     |                |  |    |  |            |  | 18 |  | CÉDULA                |  |    |            |           |  |   |  |   |  | 19       |  | CARGO                 |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 17 |  | RENE SANTOS COBOS                         |  |    |     |                |  |    |  |            |  | 18 |  | 1304370685            |  |    |            |           |  |   |  |   |  | 19       |  | BERENTE               |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 20 |  | PERSONAL OCUPADO                          |  |    |     |                |  |    |  |            |  | 21 |  | AUDITOR EXTERNO       |  |    |            |           |  |   |  |   |  | R.N.A.E. |  |                       |  |    |  |           |  |   |  |  |  |  |  |  |  |
| 20 |  | DIRECCIÓN                                 |  | —  |     | ADMINISTRACIÓN |  | 1  |  | PRODUCCIÓN |  | —  |  | OTROS                 |  | —  |            | 21        |  |   |  |   |  |          |  |                       |  |    |  |           |  |   |  |  |  |  |  |  |  |

[illegible]

|       |        |
|-------|--------|
| TOTAL | 400.00 |
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**NOTA: EL PRESENTE FORMULARIO NO SE ACEPTARÁ CON ENMENDADURAS O TACHONES.**

FECHA DE PRESENTACIÓN

**ORIGINAL: SUPERINTENDENCIA DE COMPAÑÍAS**

MAXIGRAF S.A.: GUIL: 2200136 - QUITO: 2483922 - 2483923 - R.U.C. 0991475176001 - RESOLUCIÓN No. 9170104DGER-0177-A 29-03-2004

FIRMA DEL REPRESENTANTE LEGAL