## REPÚBLICA DEL ECUADOR SUPERINTENDENCIA DE COMPAÑÍAS FORMULARIO SC. FORMULARIO ÚNICO DE ACTUALIZACIÓN

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| A DATOS GENERALES: IDENTIFICACIÓ   |  |                 |              |          |                         |  |               |           |                 |  |              |             |                   |
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| 01 RAZÓN O DENOMINACIÓN SOCIAL   | 02 RUC 04  | 4               | 15           | 07       | 10                      | 04   | 00            | 1         | 03 EXPEDI       | ENTE   | 1            | 254         | 65                |
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| 08 CALLE   |  |                 |              |          |                         |  |               |           | TELEFON         | <u>:</u>   | 09           | 2 2 3       | 38930             |
| ALBORADA &VAETA  | PA AV. KODOLFO B.  | <u>NA</u>       | ZU           | <u>e</u> | 09                      | MZ.  | 856           | 10        | FAX:            |  |              |             |                   |
| 11 INTERSECCIÓN  |  | _               |              |          |                         |  |               | EDIF      | ICIO C. COME    | RCIA   | L   1        | PISO, I     | DEPTO., OFICINA   |
| AV. DEMETRIO AGUIL  14 ACTIVIDAD ECONÓMICA PRINCIPAL   | FRA MALTA  |                 |              |          |                         |  | 12 /          | ) i W     | IUNDO           |  | 13           | LOCAL       | 4 2-3             |
| 14 ACTIVIDAD ECONÓMICA PRINCIPAL   |  |                 |              |          |                         |  | <b>—</b>      |           | D. ACTIV.       | ×35.   | EMAIL.       |             |                   |
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| TEPRESENTANTE LEGAL  |  |                 | ,            | ا ا      |                         |  | روا بهدا      | · 1 =     | 1 . 1 . 14      |  | CARGO        |             |                   |
| ALVAREZ ALVAREA  | Z HRIUKO MAR   | 7/10            |              | 18 6     | <u> </u>                | 08   | 19            | 0         | 160             |  |              | <u> </u>    |                   |
| 20   | PERSONAL OCUPADO   |                 |              |          |                         |  |               |           | AUDITOR EX      | CTERN  | 10           |             | R.N.A.E.          |
| DIRECCIÓN ADMINISTE  | RACIÓN PRODUCCIO   | ÓN              |              |          | OTROS                   |  |               | 21        |                 |  |              |             |                   |
| B NÓMINA DE SOCIOS O ACCIONISTA  | AS 2/  |                 |              |          |                         | <u> </u>   |               |           | 1.              |  |              |             |                   |
| E NOMINA PE SOCIOS O ACCIONISTA  |  |                 |              |          |                         | $\overline{}$  |               |           |                 | T  | CÓD.         | ACCIONES    | O APORTACIONES    |
| APELLIDOS Y NOMBRES COMPLETOS  |  |                 | NAC          | CIONALIC | DAD                     | CÉDULA, RUC O PASAPORTE  |               |           |                 | l  | i            |             |                   |
| INAALY KINATTY BARNAA MAMPIN   |  |                 | 5041100      |          |                         |  |               |           |                 | INV 1/.  |              | VALOR TOTAL |                   |
| ALVMILEC ALVALEC MR  | VAREZ ALVAREZ ARTURO MARTIN<br>CIRS MENDOZA ANFEL ANTONIO              |                 |              | ECUADOR  |                         |  | 0908740160    |           |                 |  |              | 760         |                   |
| MACIAS MENDOZA ANG   | 5 MENDOZA ANGEL ANTONIO  |                 |              | ECUADOR  |                         |  | 0912348653    |           |                 |  |              | 40          |                   |
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| <ul> <li>1/: Codificación de la Inversión Extranjera</li> <li>1: Inversión Ex</li></ul> | rsión Extranjera Olrecta. 2: Inversión Subreç<br>las baio este formato | gional 3        | : Inversió   | n Neutra | 4: Inversi              | on de extran   | jeros calific | ada cor   | mo Nacional     | `  | TOUR!        | A           | <u>U</u>          |
|  |  |                 | <del>,</del> |          | NOT                     | A: EL PRE  | SENTE         | FORM      | ULARIO NO S     | E ACE  | PTARA CO     | NENMENDA    | ADURAS O TACHONES |
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| OLIGRAFICA C.A., Besolución: 0221 - 27 / 02 / 0  | ^  |                 |              |          |                         |  |               |           | /*IISMAX C      | 7- M5  | PACOENIA     | NTE LEGAL   |                   |