

**AÑO** 2009 **No.** 00129817

|                                  |                               |  |  |  |  |  |  |  |  |                       |                |                       |  |  |  |  |  |  |  |                 |            |                                  |                      |  |  |  |  |  |  |                   |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
|----------------------------------|-------------------------------|--|--|--|--|--|--|--|--|-----------------------|----------------|-----------------------|--|--|--|--|--|--|--|-----------------|------------|----------------------------------|----------------------|--|--|--|--|--|--|-------------------|-------|------------|-------------------|-----------|--|--|--|--|--|--|----|---------------|--|--|--|--|--|--|--|--|--|
| 01                               | RAZON O DENOMINACION SOCIAL   |  |  |  |  |  |  |  |  |                       | 02             | RUC                   |  |  |  |  |  |  |  |                 |            | 1 / 7 9 2 2 / 1 / 7 7 8 0 0 / 03 |                      |  |  |  |  |  |  |                   |       | EXPEDIENTE |                   |           |  |  |  |  |  |  |    | 1 / 6 3 / 9 6 |  |  |  |  |  |  |  |  |  |
| SAN RAFAEL MEDIC CIA. LTDA.      |                               |  |  |  |  |  |  |  |  |                       |                |                       |  |  |  |  |  |  |  |                 |            |                                  |                      |  |  |  |  |  |  |                   |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| 04                               | PROVINCIA                     |  |  |  |  |  |  |  |  |                       | 05             | CANTON                |  |  |  |  |  |  |  |                 |            | 06                               | CIUDAD               |  |  |  |  |  |  |                   |       |            | 07                | PARROQUIA |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| PICHINCHA                        |                               |  |  |  |  |  |  |  |  | RUMIRAHUI             |                |                       |  |  |  |  |  |  |  | Quito           |            |                                  |                      |  |  |  |  |  |  | SAN RAFAEL        |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| 08                               | CALLE                         |  |  |  |  |  |  |  |  |                       | 09             | NUMERO                |  |  |  |  |  |  |  |                 |            | 10                               | TELEFONO:            |  |  |  |  |  |  |                   |       |            | 0 2 2 8 6 4 9 0 6 |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| GENERAL ENRIQUEZ                 |                               |  |  |  |  |  |  |  |  | 5/N                   |                |                       |  |  |  |  |  |  |  | FAX:            |            |                                  |                      |  |  |  |  |  |  | 0 2 2 8 6 4 9 0 6 |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| 11                               | INTERSECCION                  |  |  |  |  |  |  |  |  |                       | 12             | EDIFICIO C. COMERCIAL |  |  |  |  |  |  |  |                 |            | 13                               | PISO, DEPTO, OFICINA |  |  |  |  |  |  |                   |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| ISLA SANTIAGO                    |                               |  |  |  |  |  |  |  |  |                       |                |                       |  |  |  |  |  |  |  |                 |            |                                  |                      |  |  |  |  |  |  |                   |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| 14                               | ACTIVIDAD ECONOMICA PRINCIPAL |  |  |  |  |  |  |  |  |                       | 15             | COD. ACTIV.           |  |  |  |  |  |  |  |                 |            | 16                               | EMAIL                |  |  |  |  |  |  |                   |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| SERVICIOS HOSPITALARIOS          |                               |  |  |  |  |  |  |  |  |                       |                |                       |  |  |  |  |  |  |  |                 |            |                                  |                      |  |  |  |  |  |  |                   |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| 17                               | REPRESENTANTE LEGAL           |  |  |  |  |  |  |  |  |                       | 18             | CEDULA                |  |  |  |  |  |  |  |                 |            | 19                               | CARGO                |  |  |  |  |  |  |                   |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| HECTOR ALFREDO VALLEJO RODRIGUEZ |                               |  |  |  |  |  |  |  |  | 1 / 7 0 7 2 7 0 2 1 3 |                |                       |  |  |  |  |  |  |  | DELENTE DENTAL  |            |                                  |                      |  |  |  |  |  |  |                   |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| PERSONAL OCUPADO                 |                               |  |  |  |  |  |  |  |  |                       |                |                       |  |  |  |  |  |  |  | AUDITOR EXTERNO |            |                                  |                      |  |  |  |  |  |  | R.N.A.E.          |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |
| 20                               | DIRECCION                     |  |  |  |  |  |  |  |  |                       | ADMINISTRACION |                       |  |  |  |  |  |  |  |                 | PRODUCCION |                                  |                      |  |  |  |  |  |  |                   | OTROS |            |                   |           |  |  |  |  |  |  | 21 |               |  |  |  |  |  |  |  |  |  |
|                                  |                               |  |  |  |  |  |  |  |  | 5                     |                |                       |  |  |  |  |  |  |  |                 |            |                                  |                      |  |  |  |  |  |  | 10                |       |            |                   |           |  |  |  |  |  |  |    |               |  |  |  |  |  |  |  |  |  |

[illegible]

1/: Codificación de la Inversión Extranjera      1: Inversión Extranjera Directa    2: Inversión Subregional    3: Inversión Neutra    4: Inversión de extranjeros calificada como Nacional

2/ Si tiene más accionistas favor anexar las hojas necesarias bajo este formato

|       |        |
|-------|--------|
| TOTAL | 400.00 |
|-------|--------|

**NOTA: EL PRESENTE FORMULARIO NO SE ACEPTARA CON ENMIENDAS, FIRAS O TACHONES**

**FECHA DE PRESENTACION**

**ORIGINAL: SUPERINTENDENCIA DE COMPAÑÍAS**  
**TASKI EDITORA S.A. - R.U.C.:1790716147001 - Resolución: 3328 - 29 / 07 / 96**

**FIRMA DEL REPRESENTANTE LEGAL**