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|                                |        |        |     |   |   |   |   |   |   |                       |   |   |               |   |   |   |           |            |   |   |   |                      |   |   |
|--------------------------------|--------|--------|-----|---|---|---|---|---|---|-----------------------|---|---|---------------|---|---|---|-----------|------------|---|---|---|----------------------|---|---|
| RAZON O DENOMINACION SOCIAL    |        | 02     | RUC | 1 | 7 | 9 | 1 | 2 | 9 | 8                     | 4 | 4 | 6             | 0 | 0 | 1 | 03        | EXPEDIENTE | 5 | 3 | 0 | 6                    | 2 |   |
| RAMIREZ ROTAS CIA. LTDA        |        |        |     |   |   |   |   |   |   |                       |   |   |               |   |   |   |           |            |   |   |   |                      |   |   |
| PROVINCIA                      | CANTON | CIUDAD |     |   |   |   |   |   |   |                       |   |   |               |   |   |   | PARROQUIA |            |   |   |   |                      |   |   |
| PICHINCHA                      | QUITO  |        |     |   |   |   |   |   |   |                       |   |   |               |   |   |   | CUMBAYA   |            |   |   |   |                      |   |   |
| CALLE                          |        |        |     |   |   |   |   |   |   | NUMERO                |   |   | TELEFONO:     |   |   |   |           |            |   |   |   |                      |   |   |
| INTEROCEANICA                  |        |        |     |   |   |   |   |   |   | K 8 1/2               |   |   | 2 8 9 2 7 3 7 |   |   |   |           |            |   |   |   |                      |   |   |
| INTERSECCION                   |        |        |     |   |   |   |   |   |   | EDIFICIO C. COMERCIAL |   |   |               |   |   |   |           |            |   |   |   | PISO, DEPTO, OFICINA |   |   |
| ACTIVIDAD ECONOMICA PRINCIPAL  |        |        |     |   |   |   |   |   |   | COD. ACTIV.           |   |   | EMAIL         |   |   |   |           |            |   |   |   |                      |   |   |
| COMERCIO FARMACOS VETERINARIOS |        |        |     |   |   |   |   |   |   | 6 1 6 0 6             |   |   | -             |   |   |   |           |            |   |   |   |                      |   |   |
| REPRESENTANTE LEGAL            |        |        |     |   |   |   |   |   |   | CEDULA                |   |   | CARGO         |   |   |   |           |            |   |   |   |                      |   |   |
| HURTADO CIFUENTES OSCAR        |        |        |     |   |   |   |   |   |   | 1 7 1 1 4 3 9 1 2 4 8 |   |   | GERENTE       |   |   |   |           |            |   |   |   |                      |   |   |
| PERSONAL OCUPADO               |        |        |     |   |   |   |   |   |   | AUDITOR EXTERNO       |   |   |               |   |   |   |           |            |   |   |   | R.N.A.E.             |   |   |
| 1                              |        |        |     |   |   |   |   |   |   | 2                     |   |   |               |   |   |   |           |            |   |   |   | 4                    | - | - |

[illegible]

TOTAL 11600.00

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

|     |  |  |  |     |  |     |  |
|-----|--|--|--|-----|--|-----|--|
| AÑO |  |  |  | MES |  | DIA |  |
|     |  |  |  |     |  |     |  |

ORIGINAL: SUPERINTENDENCIA DE COMPAÑIAS  
IMPRESO POR OFFSETEC S.A. R.U.C. 1790149749001 RESOLUCION 9170104DGER-0177-A 29-03-04.

FIRMA DEL REPRESENTANTE LEGAL