

| <b>REPÚBLICA DEL ECUADOR</b><br><b>SUPERINTENDENCIA DE COMPAÑÍAS</b><br><small>FORMULARIO SC</small> <b>FORMULARIO ÚNICO DE ACTUALIZACIÓN</b> |  |                          |  |                       |   |              |   |   |   | <b>AÑO</b> 2005 |   | <b>N°</b> 500022616 |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------|--|-----------------------|---|--------------|---|---|---|-----------------|---|---------------------|---|---|---|---|---------------|---|---|---|---|---------|---|---|---|---|
| <b>A.- DATOS GENERALES: IDENTIFICACIÓN Y LOCALIZACIÓN DE LA EMPRESA</b>                                                                       |  |                          |  |                       |   |              |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| 01 RAZÓN O DENOMINACIÓN SOCIAL                                                                                                                |  | 02 RUC                   |  | 0                     | 9 | 9            | 0 | 9 | 0 | 3               | 6 | 9                   | 7 | 0 | 0 | 1 | 03 EXPEDIENTE |   | 5 | 5 | 1 | 2       | 9 | - | 8 | 7 |
| 04 PROVINCIA                                                                                                                                  |  | 05 CANTÓN                |  | 06 CIUDAD             |   | 07 PARROQUIA |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| GUAYAS                                                                                                                                        |  | GUAYAQUIL                |  | GUAYAQUIL             |   | ROCAFUERTE   |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| 08 CALLE                                                                                                                                      |  | 09 NÚMERO                |  | 10 TELÉFONO:          |   | 2            |   | 3 |   | 2               |   | 5                   |   | 9 |   | 5 |               | 5 |   |   |   |         |   |   |   |   |
| CHILE                                                                                                                                         |  |                          |  |                       |   | FAX:         |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| 11 INTERSECCIÓN                                                                                                                               |  | 12 EDIFICIO C. COMERCIAL |  | PISO, DEPTO., OFICINA |   |              |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| AGUIRRE                                                                                                                                       |  |                          |  |                       |   |              |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| 13 ACTIVIDAD ECONÓMICA PRINCIPAL                                                                                                              |  | 14 CÓD. ACTIV.           |  | EMAIL                 |   |              |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| ARRENDAMIENTO DE BIENES INMUEBLES                                                                                                             |  | 8                        |  | 3                     |   | 1            |   | 0 |   | 1               |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| 15 REPRESENTANTE LEGAL                                                                                                                        |  | 16 CÉDULA                |  | CARGO                 |   |              |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| DRA. FABIOLA BEJAR DE EGAS                                                                                                                    |  | 0                        |  | 9                     |   | 0            |   | 3 |   | 2               |   | 7                   |   | 7 |   | 9 |               | 4 |   | 5 |   | GERENTE |   |   |   |   |
| 17 PERSONAL OCUPADO                                                                                                                           |  | 18 AUDITOR EXTERNO       |  | R.N.A.E.              |   |              |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| DIRECCIÓN                                                                                                                                     |  | ADMINISTRACIÓN           |  | PRODUCCIÓN            |   | OTROS        |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |
| 1                                                                                                                                             |  |                          |  |                       |   |              |   |   |   |                 |   |                     |   |   |   |   |               |   |   |   |   |         |   |   |   |   |

[illegible]

|       |        |
|-------|--------|
| TOTAL | 800.00 |
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|                       |     |   |   |     |     |
|-----------------------|-----|---|---|-----|-----|
|                       | AÑO |   |   | MES | DÍA |
| FECHA DE PRESENTACIÓN | 2   | 0 | 0 | 6   | 0   |