

FORMULARIO SC  **FORMULARIO ÚNICO DE ACTUALIZACIÓN**

**Nº 500223605**

|                                                         |                               |  |  |  |  |  |  |  |  |                     |                       |        |    |        |   |   |   |   |   |                      |                       |            |   |    |           |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
|---------------------------------------------------------|-------------------------------|--|--|--|--|--|--|--|--|---------------------|-----------------------|--------|----|--------|---|---|---|---|---|----------------------|-----------------------|------------|---|----|-----------|----|------------|---|---|--------|---|---|-------|---|---|---|---|---|---|---|--|--|----|--|--|--|--|--|--|--|--|--|--|
| 01                                                      | RAZÓN O DENOMINACIÓN SOCIAL   |  |  |  |  |  |  |  |  |                     | 02                    | RUC    | 0  | 9      | 9 | 1 | 2 | 9 | 6 | 1                    | 1                     | 5          | 0 | 0  | 1         | 03 | EXPEDIENTE | 7 | 0 | 9      | 9 | 7 |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| FIDUNE GOCIOS S.A.                                      |                               |  |  |  |  |  |  |  |  |                     |                       |        |    |        |   |   |   |   |   |                      |                       |            |   |    |           |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| 04                                                      | PROVINCIA                     |  |  |  |  |  |  |  |  |                     | 05                    | CANTÓN | 06 | CIUDAD |   |   |   |   |   |                      |                       |            |   | 07 | PARROQUIA |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| GUAYAS                                                  |                               |  |  |  |  |  |  |  |  | GUAYAQUIL           |                       |        |    |        |   |   |   |   |   | GUAYAQUIL            |                       |            |   |    |           |    |            |   |   | TARQUI |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| 08                                                      | CALLE                         |  |  |  |  |  |  |  |  |                     | 09                    | NÚMERO |    |        |   |   |   |   |   |                      |                       | TELÉFONO:  |   |    |           |    |            |   |   |        |   | 0 | 4     | 2 | 6 | 8 | 8 | 0 | 7 | 7 |  |  |    |  |  |  |  |  |  |  |  |  |  |
| AV. MIGUEL H. ALCIVAR. EDIF. TORRES DEL NORTE - TORRE B |                               |  |  |  |  |  |  |  |  |                     |                       |        |    |        |   |   |   |   |   | FAX:                 |                       |            |   |    |           |    |            |   |   | 0      | 4 | 2 | 6     | 8 | 8 | 0 | 7 | 8 |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| 11                                                      | INTERSECCIÓN                  |  |  |  |  |  |  |  |  |                     | EDIFICIO C. COMERCIAL |        |    |        |   |   |   |   |   |                      | PISO, DEPTO., OFICINA |            |   |    |           |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
|                                                         |                               |  |  |  |  |  |  |  |  | 12 TORRES DEL NORTE |                       |        |    |        |   |   |   |   |   | 13 PISO 5 - OFIC 506 |                       |            |   |    |           |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| 14                                                      | ACTIVIDAD ECONÓMICA PRINCIPAL |  |  |  |  |  |  |  |  |                     | CÓD. ACTIV.           |        |    |        |   |   |   |   |   |                      | EMAIL                 |            |   |    |           |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| ADMINISTRADORA DE FONDOS Y FIDEICOMISOS                 |                               |  |  |  |  |  |  |  |  |                     |                       |        |    |        |   |   |   |   |   |                      |                       |            |   |    |           |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| 17                                                      | REPRESENTANTE LEGAL           |  |  |  |  |  |  |  |  |                     | CÉDULA                |        |    |        |   |   |   |   |   |                      | CARGO                 |            |   |    |           |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| GARCIA HENESES ABELARDO JAVIER                          |                               |  |  |  |  |  |  |  |  | 18 09 08 72 03 78   |                       |        |    |        |   |   |   |   |   | 19 PRESIDENTE        |                       |            |   |    |           |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| 20                                                      | PERSONAL OCUPADO              |  |  |  |  |  |  |  |  |                     | AUDITOR EXTERNO       |        |    |        |   |   |   |   |   |                      | R.N.A.E.              |            |   |    |           |    |            |   |   |        |   |   |       |   |   |   |   |   |   |   |  |  |    |  |  |  |  |  |  |  |  |  |  |
| DIRECCIÓN                                               |                               |  |  |  |  |  |  |  |  | 1                   | ADMINISTRACIÓN        |        |    |        |   |   |   |   |   |                      | 1                     | PRODUCCIÓN |   |    |           |    |            |   |   |        |   | 3 | OTROS |   |   |   |   |   |   |   |  |  | 21 |  |  |  |  |  |  |  |  |  |  |

[illegible]

|       |            |
|-------|------------|
| TOTAL | 263.000,00 |
|-------|------------|

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

**FIRMA DEL REPRESENTANTE LEGAL**

