

200024017

## FORMULARIO ÚNICO DE ACTUALIZACIÓN

|                                                        |                               |  |  |  |  |  |  |  |  |           |                       |     |   |   |       |   |   |   |   |            |                       |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
|--------------------------------------------------------|-------------------------------|--|--|--|--|--|--|--|--|-----------|-----------------------|-----|---|---|-------|---|---|---|---|------------|-----------------------|---|---|---|---|----|------------|--|--|--------|-----------|---|---|---|---|---|---|---|---|---|---|
| 01                                                     | RAZÓN O DENOMINACIÓN SOCIAL   |  |  |  |  |  |  |  |  |           | 02                    | RUC | 0 | 9 | 9     | 1 | 4 | 1 | 8 | 1          | 1                     | 3 | 0 | 0 | 1 | 03 | EXPEDIENTE |  |  |        |           |   |   |   |   |   | 7 | 9 | 2 | 2 | 1 |
| SOLEAMAR S.A.                                          |                               |  |  |  |  |  |  |  |  |           |                       |     |   |   |       |   |   |   |   |            |                       |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
| 04                                                     | PROVINCIA                     |  |  |  |  |  |  |  |  |           | CANTÓN                |     |   |   |       |   |   |   |   |            | CIUDAD                |   |   |   |   |    |            |  |  |        | PARROQUIA |   |   |   |   |   |   |   |   |   |   |
| GUAYAS                                                 |                               |  |  |  |  |  |  |  |  | GUAYAQUIL |                       |     |   |   |       |   |   |   |   | GUAYAQUIL  |                       |   |   |   |   |    |            |  |  | XIMENA |           |   |   |   |   |   |   |   |   |   |   |
| 08                                                     | CALLE                         |  |  |  |  |  |  |  |  |           | NÚMERO                |     |   |   |       |   |   |   |   |            | TELÉFONO:             |   |   |   |   |    |            |  |  |        | 2         | 3 | 3 | 8 | 6 | 1 | 5 |   |   |   |   |
| CIUDADELA LA SAIBA MANAZANA B                          |                               |  |  |  |  |  |  |  |  | S-4       |                       |     |   |   |       |   |   |   |   | FAX:       |                       |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
| 11                                                     | INTERSECCIÓN                  |  |  |  |  |  |  |  |  |           | EDIFICIO C. COMERCIAL |     |   |   |       |   |   |   |   |            | PISO, DEPTO., OFICINA |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
| -----                                                  |                               |  |  |  |  |  |  |  |  | -----     |                       |     |   |   |       |   |   |   |   | -----      |                       |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
| 14                                                     | ACTIVIDAD ECONÓMICA PRINCIPAL |  |  |  |  |  |  |  |  |           | CÓD. ACTIV.           |     |   |   |       |   |   |   |   |            | EMAIL                 |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
| ADQUISICIÓN, ENAJAMAMIENTO, ARRED. DE BIENES INMUEBLES |                               |  |  |  |  |  |  |  |  | 8         | 3                     | 1   | 0 | 1 | ----- |   |   |   |   |            |                       |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
| 17                                                     | REPRESENTANTE LEGAL           |  |  |  |  |  |  |  |  |           | CÉDULA                |     |   |   |       |   |   |   |   |            | CARGO                 |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
| ROMERO QUITO MARIA ANTONIETA                           |                               |  |  |  |  |  |  |  |  | 0         | 9                     | 1   | 1 | 0 | 4     | 4 | 6 | 4 | 2 | PRESIDENTE |                       |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
| 20                                                     | PERSONAL OCUPADO              |  |  |  |  |  |  |  |  |           | AUDITOR EXTERNO       |     |   |   |       |   |   |   |   |            | R.N.A.E.              |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |
| DIRECCIÓN                                              |                               |  |  |  |  |  |  |  |  | OTROS     |                       |     |   |   |       |   |   |   |   | -----      |                       |   |   |   |   |    |            |  |  |        |           |   |   |   |   |   |   |   |   |   |   |

[illegible]

|       |        |
|-------|--------|
| TOTAL | 200.00 |
|-------|--------|

**NOTA: EL PRESENTE FORMULARIO NO SE ACEPTARÁ CON ENMIENDAS O TACHONES**

| AÑO |  |  |  | MES |  | DÍA |  |
|-----|--|--|--|-----|--|-----|--|
|     |  |  |  |     |  |     |  |

**FIRMA DEL REPRESENTANTE LEGAL**