

20 0088993

|                                                      |  |                 |     |                     |   |   |   |   |   |                                 |   |           |   |                     |   |   |    |            |   |                                    |   |                     |   |   |   |   |  |
|------------------------------------------------------|--|-----------------|-----|---------------------|---|---|---|---|---|---------------------------------|---|-----------|---|---------------------|---|---|----|------------|---|------------------------------------|---|---------------------|---|---|---|---|--|
| RAZÓN O DENOMINACIÓN SOCIAL<br>SEGRATI S.A.          |  | 02              | RUC | 0                   | 9 | 9 | 1 | 4 | 4 | 6                               | 7 | 9         | 6 | 0                   | 0 | 1 | 03 | EXPEDIENTE |   |                                    |   | 8                   | 1 | 4 | 0 | 1 |  |
| PROVINCIA<br>GUAYAS                                  |  | CANTÓN<br>GUIL. |     | CIUDAD<br>GUAYAQUIL |   |   |   |   |   |                                 |   |           |   | PARROQUIA<br>TARQUI |   |   |    |            |   |                                    |   |                     |   |   |   |   |  |
| CALLE<br>FRANCISCO BOLAÑA                            |  |                 |     |                     |   |   |   |   |   | NÚMERO<br>610                   |   | TELÉFONO: |   | 0                   | 4 | 2 | 2  | 8          | 0 | 6                                  | 0 | 2                   |   |   |   |   |  |
|                                                      |  |                 |     |                     |   |   |   |   |   |                                 |   | FAX:      |   | 0                   | 4 | 2 | 2  | 1          | 1 | 0                                  | 7 | 9                   |   |   |   |   |  |
| INTERSECCIÓN<br>-                                    |  |                 |     |                     |   |   |   |   |   | EDIFICIO C. COMERCIAL<br>CEDIPE |   |           |   |                     |   |   |    |            |   | PISO, DEPTO., OFICINA<br>2do. Piso |   |                     |   |   |   |   |  |
| ACTIVIDAD ECONÓMICA PRINCIPAL<br>INMOBILIARIA        |  |                 |     |                     |   |   |   |   |   | CÓD. ACTIV.                     |   |           |   | EMAIL               |   |   |    |            |   |                                    |   |                     |   |   |   |   |  |
| REPRESENTANTE LEGAL<br>DR. LEONARDO BUSTAMANTE MORAN |  |                 |     |                     |   |   |   |   |   | CÉDULA                          |   | 1         | 3 | 0                   | 2 | 4 | 0  | 6          | 0 | 8                                  | 5 | CARGO<br>PRESIDENTE |   |   |   |   |  |
| PERSONAL OCUPADO                                     |  |                 |     |                     |   |   |   |   |   | AUDITOR EXTERNO                 |   |           |   |                     |   |   |    |            |   | R.N.A.E.                           |   |                     |   |   |   |   |  |
| 1                                                    |  |                 |     |                     |   |   |   |   |   |                                 |   |           |   |                     |   |   |    |            |   |                                    |   |                     |   |   |   |   |  |

[illegible]

|              |                  |
|--------------|------------------|
| <b>TOTAL</b> | <b>\$ 200.00</b> |
|--------------|------------------|

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

| AÑO |   |   |   | MES |   | DÍA |   |
|-----|---|---|---|-----|---|-----|---|
| 2   | 0 | 0 | 4 | 0   | 3 | 0   | 9 |

**FIRMA DEL REPRESENTANTE LEGAL**