

발급번호 Issuance Number	사업자등록증명 Certificate of Business Registration (법인사업자) (Corporate Taxpayer)		처리기간 Processing Time
7004-907-5961-906			즉시 Immediately
상호(법인명) Name of Business	대한성형외과학회 Korean Society of Plastic and Reconstructive Surgeons (106-82-07248)		
사업자등록번호 Business Taxpayer ID Number	106-82-07248		
성명(대표자) Name of Representative	이원재 LEE WON JAI (691003-*****)		
대표유형 Type of Representation	단독대표(Sole Representation)		
주민(법인)등록번호 Resident(Corporation) Registration Number	691003-*****		
사업장소재지 Business Address	서울특별시 마포구 마포대로 109, 제20층 제오-2003호(공덕동, 롯데캐슬프레지던트) 101-2003, 109, Mapo-daero, Mapo-gu, Seoul, Republic of Korea		
개업일 Date of Business Start	2007년(Year) 10월(Month) 01일(Day)		
사업자등록일 Date of Business Registration	1995년(Year) 09월(Month) 19일(Day)		
업태 Business Type	서비스 Professional, scientific and technical activities		
종목 Business Item	광고업 Media Advertising Agencies		
공동사업자 Joint Business Owner	성명(법인명) Name of Resident/Name of Business	주민(사업자)등록번호 Resident Number/Business Taxpayer ID Number	
	해당사항 없습니다 (No Data)		

위와 같이 증명합니다.

I certify that above information is true and correct to the best of my knowledge and belief.

※ 위 내용은 발급일 현재 상황으로서 추후 변경될 수 있습니다.

This information is true as of the issuance date of this certification and but maybe subject to change in the future.

※ 영문 임의 기재사항[상호, 성명(대표자), 업태, 종목, 상세주소]은 실제적 권리관계를 증명하는 효력이 없습니다.

Arbitrary data written in English [Name of Business, Name of Representative, Business Address, Business Type, and Business Item] do not hold a power to prove substantive rights and responsibilities.

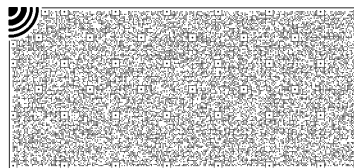
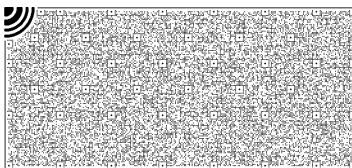
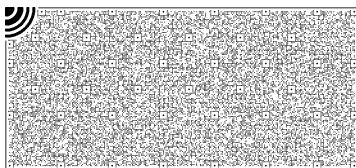
접수번호 Receipt No.	504506372100
담당부서 Department	민원봉사실 Taxpayer Assistance Center
담당자 Staff in Charge	
연락처 Telephone No.	+82-2-705-7229

2025 년(Year) 4 월(Month) 16 일(Day)

마포세무서장 (인)

Head of Mapo District Tax Office

(Stamp)



\* 본 증명의 위·변조 여부는 발급일로부터 90일 이내 「국세청 홈택스(www.hometax.go.kr) 또는 모바일 홈택스 > 민원증명(증명발급) > 민원증명 원본확인」에서 발급번호로 확인, 또는 문서 하단의 바코드로 확인이 가능합니다.

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