



APMC ILOILO <acemciloilo.corpsec@gmail.com>

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**Allied Care Experts (ACE) Medical Center Iloilo Inc \_23-B\_25 May 2021**

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**ICTD Submission** <ictdsubmission+canned.response@sec.gov.ph>  
To: acemciloilo.corpsec@gmail.com

Tue, May 25, 2021 at 11:34 AM

Dear Customer,

**SUCCESSFULLY ACCEPTED**  
(subject to verification and review of the quality of the attached document)

Thank you.

SEC ICTD.

# COVER SHEET

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S.E.C. Registration Number

A	L	L	I	E	D	C	A	R	E	E	X	P	E	R	T	S	(	A	C	E	)				
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M	E	D	I	C	A	L	C	E	N	T	E	R	-	I	L	O	I	L	O	I	N	C	.			
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(Company's Full Name)

2	N	D	F	L	O	O	R	I	M	S	B	L	D	G	.	B	R	G	Y	.				
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B	A	N	T	U	D	L	U	N	A	S	T	.	,	L	A	P	A	Z						
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(Business address: No. Street City / Town / Province)

MAYLENE B. VILLANUEVA
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Contact Person

(033) 321-57-48
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Company Telephone Number

1	2
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Month

3	1
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Day

23-B MR. LEMUEL T. FERNANDEZ
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FORM TYPE

0	4
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Month

3rd	Sun
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Day

Fiscal Year

Annual Meeting

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Secondary License Type, If Applicable

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Dept. Requiring this Doc.

N/A
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Amended Articles Number/Section

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Total No. of Stockholders

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Domestic

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Foreign

Total Amount of Borrowings

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Top be accomplished by SEC Personnel concerned

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CASHIER



SECURITIES AND EXCHANGE COMMISSION  
Metro Manila, Philippines

FORM 23-B

REVISED

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES  
Filed pursuant to Section 23 of the Securities Regulation Code

Check box if no longer subject to filing requirement

1. Name and Address of Reporting Person FERNANDEZ LEMUEL TENDENCIA (Last) (First) (Middle)			2. Issuer Name and Trading Symbol ALLIED CARE EXPERTS (ACE) MEDICAL CENTER - ILOILO, INC.		7. Relationship of Reporting Person to Issuer (Check all applicable)	
(Street) LOT2 BLOCK 7, JMF SUBD., GUZMAN, MANDURRIAO			3. Tax Identification Number 143-266-842-000	5. Statement for Month/Year 5/4/2021	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
(City) (Province) (Postal Code) ILOILO ILOILO 5000			4. Citizenship Filipino	6. If Amendment, Date of Original (Month/Year)	<input type="checkbox"/> Officer	<input type="checkbox"/> Other (specify below)

Table 1 - Equity Securities Beneficially Owned

1. Class of Equity Security	2. Transaction Date (Month/Day/Year)	4. Securities Acquired (A) or Disposed of (D)			3. Amount of Securities Owned at End of Month		4. Owned Direct (D)	6. Nature of Indirect Beneficial Ownership
		Amount	(A) or (D)	Price	%	Number of Shares		
COMMON SHARES	Beg. Balance				0.85	2,000	Direct	
						Bal. as of 1/29/2021		
	5/4/2021	40	A	40,000.00				
	End. Balance				0.017	40	Direct	
						Bal. as of 05/04/21		

(Print or Type Responses)

If the change in beneficial ownership is 50% of the previous shareholdings or is equal to 5% of the outstanding capital stock of the issuer, provide the disclosure requirements set forth on page 3 of this form.

Reminder: Report on a separate line for each class of equity securities beneficially owned directly or indirectly.

- (1) A person is directly or indirectly the beneficial owner of any equity security with respect to which he has or shares:
  - (A) Voting power which includes the power to vote, or to direct the voting of, such security; and/or
  - (B) Investment power which includes the power to dispose of, or to direct the disposition of, such security.

(2) A person will be deemed to have an indirect beneficial interest in any equity security which is:

- (A) held by members of a person's immediate family sharing the same household;
- (B) held by a partnership in which such person is a general partner;
- (C) held by a corporation of which such person is a controlling shareholder; or
- (D) subject to any contract, arrangement or understanding which gives such person voting power or investment power with respect to such security.







