

COVER SHEET

SEC Number **CS201423954**

File Number _____

ASIA PACIFIC MEDICAL CENTER - ILOILO, INC.
(Formerly: ALLIED CARE EXPERTS (ACE) MEDICAL CENTER-ILOILO, INC.)
(Company's Full Name)

Brgy. Ungka, Jaro, Iloilo City 5000
(Company's Address)

Tel # 321-57-48/0917-523-4802
(Company's Telephone Number)

2024 December 31
(Fiscal Year Ending-Month and Day)

23-B
(FORM TYPE)

(Period Ended Date)

(Amendment Designation, if Applicable)

Issuer of Securities
(Secondary License Type, if any)

REPUBLIC OF THE PHILIPPINES)
CITY AND PROVINCE OF ILOILO) S.S.

Certification

I, **AMADO M. LAVALLE, JR.**, President of **Asia Pacific Medical Center – Iloilo Inc.**, (formerly: **Allied Care Experts (ACE) Medical Center-Iloilo Inc.**), with SEC registration number **CS201423954** with principal office at **Barangay Ungka, Jaro, Iloilo City**, on oath state:

- 1) That I have caused this SEC Form **23-B** dated 10 October 2024 to be prepared;
- 2) That I read and understood its contents which are true and correct of my own personal knowledge and/or based on true records;
- 3) That I will comply with the requirements set forth in SEC Memorandum Circular No.18 dated 09 October 2023 for a complete and official submission of reports and/or documents through electronic mail; and
- 4) That I am fully aware that documents filed online which requires pre-evaluation and/or processing fee shall be considered complete and officially received only upon payment of a filing fee.

IN WITNESS WHEREOF, I have hereunto set my hand this 10 day of October 2024 at Iloilo City.


AMADO M. LAVALLE, JR.
Affiant

SUBSCRIBED AND SWORN to before me this OCT 10 2024 day of October 2024 at Iloilo City, Philippines, affiant exhibiting to me his Valid ID PRC# 0068822 issued at Iloilo City.

Doc. No. 172
Page No. 36
Book No. 1
Series of 2024


ATTY. NOEL O. PALOMADO
Notary Public for the City and Province of Iloilo
Until Dec. 31, 2024 / Notarial Commission Registry No. 93
PTR No. 417070 / Iloilo City / Jan. 2, 2024
IBP No. 330139 / My IBP App / Dec. 18, 2023
MCLE No. VII-0009668 / Feb. 14, 2022 / Roll No. 44780
JAGNA-AN, BELLOGA, AGOT & ASSOCIATES
Arguelles Street, Jaro, Iloilo City
Telefax No. 033-329-3156

FORM 23-B (continued)

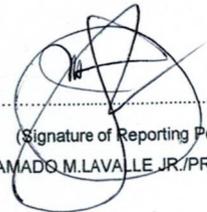
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., warrants, options, convertible securities)

| 1. Derivative Security | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Yr) | 4. Number of Derivative Securities Acquired (A) or Disposed of (D) | | 5. Date Exercisable and Expiration Date (Month/Day/Year) | | 6. Title and Amount of Underlying Securities | | 7. Price of Derivative Security | 8. No. of Derivative Securities Beneficially Owned at End of Month | 9. Ownership Form of Derivative Security; Direct (D) or Indirect (I) * | 10. Nature of Indirect Beneficial Ownership |
|------------------------|--|------------------------------------|--|------------|--|-----------------|--|----------------------------|---------------------------------|--|--|---|
| | | | Amount | (A) or (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| NA | | | | | | | | | | | | |
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Explanation of Responses:

Note: File three (3) copies of this form, one of which must be manually signed.
Attach additional sheets if space provided is insufficient.

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this Report is true, complete and accurate.
This report is signed in the City of Iloilo on October 10, 2024

By: 
(Signature of Reporting Person)
AMADO M. LAVALLE JR./PRESIDENT