

**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)

**2025 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 )

\_\_\_\_\_ ) S.S.  
**PASIG CITY**

**Certification**

I, **Brandt Luke Q. Biron**, Director 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 26 June 2025 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 26 JUN 2025 day of June 2025 at **PASIG CITY**.

  
**BRANDT LUKE Q. BIRON**  
Affiant

26 JUN 2025 **PASIG CITY**

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_\_ day of June 2025 at \_\_\_\_\_, Philippines, affiant exhibiting to me his valid Passport #8902088B issued at the DFA Manila.

Doc. No. 478  
Page No. 97  
Book No. 21  
Series of 2025.

**FERDINAND D. AVAHAO**  
Notary Public  
For and in Pasig City and the Municipality of Paterson  
Appointment No. 96 (2024-2025) valid until 12/31/2025  
MCLE Exemption No. VIII-BEP003234, until 04/14/28  
Roll No. 46377; IBF LRN 02459; OR 535886; 06/21/2001  
TIN 123-011-785; PTR 2831461AA; 01/03/25; Pasig City  
U-5, G/F West Tower PSE, Exchange Road  
Ortigas Center, Pasig City Tel.+632-86314090



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				
N/A												

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 PASIG CITY on 24 JUNE 2025.

By: .....  
(Signature of Reporting Person)  
**BRANDT LUKE Q. BIRON/DIRECTOR**  
Name/Title