

**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 )  
CITY AND PROVINCE OF ILOILO ) S.S.  
ILOILO CITY

**Certification**

I, **FREDILYN G. SAMORO**, 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 10 January 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 10<sup>th</sup> day of January 2025 at Iloilo City.

  
**FREDILYN G. SAMORO**  
Affiant

**SUBSCRIBED AND SWORN** to before me this JAN 10, 2025 day of January 2025 at Iloilo City, Philippines, affiant exhibiting to me her Valid ID PRC# 0072330 issued at Iloilo City.

Doc. No. 184  
Page No. 32  
Book No. 11  
Series of 2025

  
**ATTY. NOEL O. PALOMADO**  
Notary Public for the City and Province of Iloilo  
Until December 31, 2025 / Notarial Commission Registry No. 93  
PTR No. 8817355 / Iloilo City / Jan. 2, 2015  
IBP No. 487595 / My IBP App / Dec. 26, 2024  
MCLE No. VII-0009688 / Feb. 14, 2022 / Roll No. 44780  
JAGNA-AN, BELLOGA, AGOT & ASSOCIATES  
Arguelles Street, Jaro, Iloilo City  
Telefax No. 033-329-3156

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 SAMORO FREDILYN GALLEGA (Last) (First) (Middle)			2. Issuer Name and Trading Symbol ASIA PACIFIC MEDICAL CENTER - ILOILO INC. FORMERLY ALLIED CARE EXPERTS (ACE) MEDICAL CENTER - ILOILO, INC.			7. Relationship of Reporting Person to Issuer (Check all applicable)		
(Street) BLK 31 LOT 5 ANA ROS VILLAGE, MANDURRIA			3. Tax Identification Number 158-036-702-000		5. Statement for Month/Year 1/10/2025		<input checked="" type="checkbox"/> Director <input type="checkbox"/> Officer <input type="checkbox"/> 10% Owner <input type="checkbox"/> Other (specify below)	
(City) (Province) (Postal Code) ILOILO ILOILO 5000			4. Citizenship Filipino			6. If Amendment, Date of Original (Month/Year)		
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	Beginning Balance				2.84%	6,834	D	
Total Direct Shares						BAL as of 10/10/2024		
Total Direct Shares		3,462	A		1.44%	3,462	D	2A(with co-owners Katrina Belle G. Samoro, Kim Karolyn G. Samoro, Karmela Marie G. Samoro)
Esmeralda Defa Rosa		4	A			4	D	
Ms. Babette S. Silao		10	D			10	D	
Karen B. Silao		10	D			10	D	
End Balance					4.28%	10,280		
						Bal as of 1/10/2025		

(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.

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 <b>SAMORO FREDILYN GALLEGA</b>			2. Issuer Name and Trading Symbol <b>ASIA PACIFIC MEDICAL CENTER - ILOILO INC. FORMERLY ALLIED CARE EXPERTS (ACE) MEDICAL CENTER - ILOILO, INC.</b>			7. Relationship of Reporting Person to Issuer (Check all applicable)		
(Last)	(First)	(Middle)	3. Tax Identification Number  158-036-702-000	5. Statement for Month/Year  1/10/2025		<input checked="" type="checkbox"/> Director	<input type="checkbox"/> 10% Owner	<input type="checkbox"/> Other
(Street) BLK 31 LOT 5 ANA ROS VILLAGE, MANDURRIAO			4. Citizenship  Filipino	6. If Amendment, Date of Original (Month/Year)		(specify below)		
(City)	(Province)	(Postal Code)	Table 1 - Equity Securities Beneficially Owned					
ILOILO	ILOILO	5000						
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. Owners Direct (D) or	6. Nature of Indirect Beneficial Ownership
		Amount	(A) or (D)	Price	%	Number of Shares		
Founder Shares					3.33%	20	D	
Common Shares					2.84%	6,814	D	
Total Direct Shares		Beginning Balance	6,834					
		BAL as of 10/10/2024						
Founder Shares (direct)		10	A		1.67%	10	D	2A(with co-owners Katrina Belle G. Samoro, Kim Karolyn G. Samoro, Karmela Marie G. Samoro)
Common Shares (direct)		3,452	A		1.44%	3,452	D	2A(with co-owners Katrina Belle G. Samoro, Kim Karolyn G. Samoro, Karmela G. Samoro)
	Esmeralda Dela Rosa	4	A			4	D	
	Ma. Babette S. Silao	10	D			10	D	
	Karen B. Silao	10	D			10	D	
		End Balance			4.28%	10,280		
								BAL as of 1/10/2025

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.

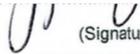
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  
(e.g., warrants, options, convertible securities)

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												

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 1/10/25.

By   
(Signature of Reporting Person)  
FREDILYN G. SAMORO/DIRECTOR  
Name/Title