SECURITIES AND EXCHANGE COMMISSION
THE SEC HEADQUARTERS 7907 Makati Avenue, Salcedo Village, Bel-Air, Makati City
1209 Trunk Line No:02-5322-7696 Email Us:www.sec.gov.ph/imessagemo@sec.gov.ph

The following document has been received:

Receiving: ERMD Submission
Receipt Date and Time: August 10, 2026 12:27:55 PM

Company Information

SEC Registration No.: 0000134800
Company Name: JOLLIVILLE HOLDINGS CORP.
Industry Classification: J66940
Company Type: Stock Corporation

Document Information

Document ID: HQ0811202614820689
Document Type: Initial Statement of Beneficial Ownership
Document Code: 23A
Period Covered: August 6, 2026
Submission Type:
Remarks: ORTIZ-LUIS SERGIO ANTONIO S.

Acceptance of this document is subject to review of forms and contents

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)

2026 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, **LUSYL M. GOMEZ**, **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 August 2026 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 August 2026 at Iloilo City.

LUSYL M. GOMEZ
Affiant

SUBSCRIBED AND SWORN to before me this 10 AUG 2026 day of August 2026 at Iloilo City Philippines, affiant exhibiting to me his Valid ID PRC# 0061344 issued at Iloilo.

NOTARY PUBLIC

ATTY. SHAIRA MAE B. CHAVEZ
NOTARY PUBLIC FOR THE PROVINCE & CITY OF ILOILO
NOTARIAL COMMISSION NO. 83 UNTIL DECEMBER 31, 2026
ROLL OF ATTORNEYS NO. 84218
PTR NO.9226448 / 01/05/2026 / ILOILO CITY
IBP NO. 580400 / 12/31/2025 / PASIG CITY
MCLE COMPLIANCE NO. VIII-0014103
MEZZANINE, RED PLAZA BUILDING, J.M. BASA ST., ILOILO CITY

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Book No. III
Series of 2026

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	2. Issuer Name and Trading Symbol	7. Relationship of Reporting Person to Issuer (Check all applicable)
GOMEZ LUSYL MILITANTE	ASIA PACIFIC MEDICAL CENTER - ILOILO INC. (FORMERLY: ALLIED CARE EXPERTS (ACE) MEDICAL CENTER - ILOILO, INC.)	X Director ____ 10% Owner
(Last) (First) (Middle)	3. Tax Identification Number: 154-500-188-000	5. Statement for Month/Year: 10/8/2026	X Officer ____ Other (specify below)
Block 1 Lot 14 Savannah Crest A, Abilay Norte (Street)	4. Citizenship: Filipino	6. If Amendment, Date of Original (MonthYear)	Assistant Corporate Secretary
Iloilo Oton 5020 (City) (Province) (Postal Code)		

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 Owne Direct (D)	6. Nature of Indirect Beneficial Ownership
		Amount	(A) or (D)	Price	%	Number of Shares		
Founder Shares	Beg. Balance				1.67%	10	Direct	
Common Shares	Beg. Balance				1.16%	2,771	Direct	
Total Direct Shares		2,781				BAL 3/06/2025		
Common Shares								
Judy Gatuteo Manning	2/7/2026	10	D		0.004%	10		
Common Share Bal. as of 08/10/2026						2,761		
	End. Balance				1.16%	2,771	Direct	
	10/8/2026					Bal. as of 08/10/2026		

(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.

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 the City of Iloilo on 10 AUG 2026.

By: .....

(Signature of Reporting Person)

LUSYL M. GOMEZ/ASST. CORPORATE SECRETARY

Name/Title