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PART C AME, NATIONALITY ESTERAN B. UT TITLISTO VISITACION B. UT TITLISTO CRASTERAN B. UT CRASTERAN GREENCE B. UT CASTERAN GREENCE B. UT CASTER GREEN B. UT CASTER GREENCE B. UT CASTER GREENCE B. UT CASTER GREEN B. UT CASTER GREENCE B. UT CASTER GREENCE B. UT CASTER GREENC	1,410,000 1,440,000 1,440,000	Datal Jan 14.405	144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00	######################################	Control Contro	Motor I	Contar Co	th Color DIVICED Indicate Function CHAIRMAN TREAMINED RITA COAPGEATE ESUPETARY	C/M CA CA	109-102-701 230-386-643 243-739-442 248-739-648	
Paid Up Capital School Service Service Format Service Service FORMAT C FORMAT C FORMAT C FORMAT SERVICE	1,410,000 1,440,000 1,440,000	14.400 14.400 14.400 14.400 1.400	144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00 144,000,000.00	## ## ## ## ## ## ## ## ## ## ## ## ##	Carriera Contrat Contr	More I	Contac Co	CEALDANT CEALDANT CEALDANT PRESIDENT	C/B	109-102-201 232-386-643 143-739-442 148-129-648 146-486-366	
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Faid Up Capital National No. Eq. 8 No. Eq. 8	1,410,000 1,410,000 2,440,000 1,440,000 1,440,000	Data Ja.	244,000,000,00 144,000,000,00 144,000,000,00 144,000,000,00 144,000,000,00 241,001,00 241,001,00 241,001,00 3,001,00 4,000,00 4,000,00 4,000,00	### ### ### ### ### ### ### ### ### ##	2004.80 000000 000000 000000 000000 000000 0000	More I	Cottor Constant Const	CONFECTATION CONFECTATION CONFECTATION CONFECTATION CONFECTATION ELECTRICATION FRESTORMT FOR STA BUTA BUT	0399 67A/ C/A C/A C/B C/B C/B	109-102-701 230-386-643 243-739-443 248-128-848 248-128-848 251-578-521 238-351-873 278-138-996 107-966-400 107-503-693	***************************************

GENERAL INFORMATION SHEET (GIS) FOR THE YEAR 2022 STOCK CORPORATION

GENERAL INSTRUCTIONS

- 1. FOR USER CORPORATION: THIS GIS SHOULD BE SUBMITTED WITHIN THIRTY (30) CALENDAR DAYS FROM THE DATE OF THE ANNUAL STOCKHOLDERS' MEETING, DO NOT LEAVE ANY ITEM BLANK, WRITE "N.A." IF THE INFORMATION REQUIRED IS NOT APPLICABLE TO THE CORPORATION OR "NONE" IF THE INFORMATION IS NON-EXISTENT. IF THE ANNUAL STOCKHOLDERS' MEETING IS HELD ON A DATE OTHER THAN THAT STATED IN THE BY-LAWS, THE GIS SHALL BE SUBMITTED WITHIN THIRTY (30) CALENDAR DAYS AFTER THE ELECTION OF THE DIRECTORS, TRUSTEES AND OFFICERS OF THE CORPORATION AT THE ANNUAL MEMBERS' MEETING.
- IF NO MEETING IS HELD, THE CORPORATION SHALL SUBMIT THE GIS NOT LATER THAN JANUARY 30 OF THE FOLLOWING YEAR. HOWEVER, SHOULD AN ANNUAL STOCKHOLDERS' MEETING BE HELD THEREAFTER, A NEW GIS SHALL BE SUBMITTED/FILED.
- 3. THIS GIS SHALL BE ACCOMPLISHED IN ENGLISH AND CERTIFIED AND SWORN TO BY THE CORPORATE SECRETARY OF THE
- 4. THE SEC SHOULD BE TIMELY APPRISED OF RELEVANT CHANGES IN THE SUBMITTED INFORMATION AS THEY ARISE. FOR CHANGES RESULTING FROM ACTIONS THAT AROSE BETWEEN THE ANNUAL MEETINGS, THE CORPORATION SHALL SUBMIT AMENDED GIS CONTAINING THE NEW INFORMATION TOGETHER WITH A COVER LETTER SIGNED THE CORPORATE SECRETARY OF THE CORPORATION. THE AMENDED GIS AND COVER LETTER SHALL BE SUBMITTED WITHIN SEVEN (7) DAYS AFTER SUCH CHANGE
- 5 SUBMIT FOUR (4) COPIES OF THE GIS TO THE RECEIVING SECTION AT THE SEC MAIN OFFICE, OR TO SEC SATELLITE OFFICES OR EXTENSION OFFICES. ALL COPIES SHALL UNIFORMLY BE ON A4 OR LETTER-SIZED PAPER. THE PAGES OF ALL COPIES SHALL USE
- ÖNLY THE GIS ACCOMPLISHED IN ACCORDANCE WITH THESE INSTRUCTIONS SHALL BE CONSIDERED AS HAVING BEEN FILED.
- THIS GIS MAY BE USED AS EVIDENCE AGAINST THE CORPORATION AND ITS RESPONSIBLE DIRECTORS/OFFICERS FOR ANY VIOLATION OF EXISTING LAWS, RULES AND REGULATIONS

************	**********	PLEASE PRINT LEG	BLY ****	*************	*****
	MEDOCARE HEA	ALTH SYSTEMS, INC	0.		DATE REGISTERED: January 22, 2003
BUSINESS/TRADE NAME:	MEDOCARE HE	ALTH SYSTEMS, INC.			FISCAL YEAR END:
SEC REGISTRATION NUMBER:					- Carrier and Carr
100000000000000000000000000000000000000	CS2	00301686			December 31
DATE OF ANNUAL MEETING PER BY	Y-LAWS:	ANY DAY IN MARCH			CORPORATE TAX IDENTIFICATION NUMBER (TIN) 224-489-276-000
ACTUAL DATE OF ANNUAL MEETIN	IG:	La contrata			WEBSITE/URL ADDRESS:
	Apr	1 5, 2022			N/A
COMPLETE PRINCIPAL OFFICE ADD	RESS:				E-MAIL ADDRESS:
7/F EU STAT	TE TOWER, #30 (QUEZON AVENUE, (DUEZON (CITY	ebu352@yahoo.com.ph
COMPLETE BUSINESS ADDRESS:					FAX NUMBER:
7/F EU STAT	E TOWER, #30 (QUEZON AVENUE, O	QUEZON (CITY	6741-3727
OFFICIAL E-MAIL ADDRESS	ALTERNATE	E-MAIL ADDRESS	OFF	ICIAL MOBILE NUMBER	ALTERNATE MOBILE NUMBER
ebu352@yahoo.com.ph	remarknaz	ram@gmail_com		9266559118	9989260750
NAME OF EXTERNAL AUDITOR & IT	S SIGNING PARTY	IER:		REDITATION NUMBER (IF	TELEPHONE NUMBER(S):
ENRIQU	E.S. VALERIO		applicable	38508-SEC	8628-9038
PRIMARY PURPOSE/ACTIVITY/INDU	STRY PRESENTLY	ENGAGED IN:	INDUST	RY CLASSIFICATION:	GEOGRAPHICAL CODE:
HEALTH MAINTENANCE ORGANIZA	TION		(3880)		
***************************************		ERCOMPANY AFFILIA	ATIONS =		
PARENT COMPANY	,	SEC REGISTRAT	ION NO.	A	DDRESS
SUBSIDIARY/AFFILIA	TE	SEC REGISTRAT	ON NO.		DDRESS
					501200
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	NOTE:	USE ADDITIONAL SHEE	I IF NECES	SART	

GENERAL INFORMATION	SHEET
STOCK CORPORAT	
	IBLY ====================================
GOT POT ATC CHARGE.	HEALTH SYSTEMS, INC.
A. Is the Corporation a covered person under the Anti Mone	
(AMLA), as amended? (Rep. Acts. 9160/9164/10167/103	(65)
Please check the appropriate box:	
1.	
a. Banks	Jewelry dealers in precious metals, who, as a
☐ b. Offshore Banking Units	business, trade in precious metals
☐ c. Quasi-Banks	
d. Trust Entities	
e. Non-Stock Savings and Loan Associations	
☐ f. Pawnshops	
g. Foreign Exchage Dealers	5. Jewelry dealers in precious stones, who, as a
h. Money Changers	business, trade in precious stone
. Remittance Agents	
. j. Electronic Money Issuers	
k. Financial Institutions which Under Special Laws are subject to	S
Bangko Sentral ng Pilipinas' (BSP) supervision and/or regulation,	Company service providers which, as a business,
including their subsidiaries and affiliates	provide any of the following services to third
2,	parties:
a. Insurance Companies	
b. Insurance Agents	a. acting as a formation agent of juridical persons
. Insurance Brokers	b. acting as (or arranging for another person to act as)
d. Professional Reinsurers	a director or corporate secretary of a company, a
e. Reinsurance Brokers	partner of a partnership, or a similar position in
f. Holding Companies	relation to other juridical persons
g. Holding Company Systems	
h. Pre-need Companies	c. providing a registered office, business address or
L. Mutual Benefit Association	accommodation, correspondence or administrative
 j. All Other Persons and entities supervised and/or regulated by the 	address for a company, a partnership or any other
Insurance Commission (IC)	legal person or arrangement
3.	[7] I and a first the first tendence to set at
a. Securities Dealers	 d. acting as (or arranging for another person to act as) a nominee shareholder for another person
b. Securities Brokers	
C. Securities Salesman	Persons who provide any of the following services:
d. Investment Houses	a. managing of client money, securities or other assets
e. Investment Agents and Consultants	Electron transfer and constitution of the second of the se
☐ f. Trading Advisors	 b. management of bank, savings or securities accounts
Other entities managing Securities or rendering similar services	Expression of the contract of
h. Mutual Funds or Open-end Investment Companies L. Close-end Investment Companies	 c. organization of contributions for the creation,
☐ L Close-end Investment Companies	operation or management of companies
Common Trust Funds or Issuers and other similar entities Kanasfer Companies and other similar entities	TESTS TO THE COMMISSION
	 d. creation, operation or management of juridical
 L Other entities administering or otherwise dealing in currency, 	persons or arrangements, and buying and selling
commodities or financial derivatives based there on	business entities
m. Entities administering of otherwise dealing in valuable objects	8, 🗹 None of the above
n. Entities administering or otherwise dealing in cash Substitutes and	Describe
other similar monetary instruments or property supervised and/or	Bature of HEALTH MAINTENANCE ORGANIZATION
regulated by the Securities and Exchange Commission (SEC)	business:
B. Has the Corporation complied with the requirements on Custor (CDD) or Know Your Customer (KYC), record-keeping, and subr	ner Due Diligence nission of reports C Yes P No

STOCK CORPORATION

CORPORATE NA	AME		M	EDOCARE HEA	LTH SYSTEMS	INC.	
OH MEZAL TOTAL			CAPITA	L STRUCTURE			
UTHORIZED CA	PITAL STOCK						
		TYPE OF SHARES *	NUMBER OF SHARES	PAR/STAT	TED VALUE	AMOUNT (PhP (No. of shares X Par/Sta	
		COMMON	1500000		100.00		150,000,000.0
		TOTAL	1,500,000		TOTAL P		150,000,000.0
UBSCRIBED CAP	TAL	201102	1200111000000				
FILIPINO	NO. OF STOCK- HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	NUMBER OF SHARES IN THE HANDS OF THE PUBLIC **	PAR/STATED VALUE	AMOUNT (PhP)	% OF OWNERSHIE
	12	COMMON	1,440,000		100.00	144,000,000.00	100
		TOTAL	1,440,000	TOTAL	TOTAL P	144,000,000.00	
		TOTAL	277137131	NUMBER OF			
FOREIGN (INDICATE BY NATIONALITY)	NO. OF STOCK- HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	SHARES IN THE HANDS OF THE PUBLIC **	PAR/STATED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
Percentage of Fo	reign Equity :	TOTAL		TOTAL	TOTAL P		
				TOTAL	SUBSCRIBED P		
PAID-UP CAPIT	-						
FILIPINO	NO. OF STOCK- HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STAT	TED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
	12	COMMON	1,440,000		100.00	144,000,000.00	100
	77.7				mores a	144,000,000.00	
********	NO OF	TOTAL	1,440,000		TOTAL P	144,000,000.00	- AV - AVA
FOREIGN (INDICATE BY NATIONALITY)	NO. OF STOCK- HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STAT	TED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
0.00 %		TOTAL			TOTAL P		
				TOTAL PAID-U	P P	144,000,000.00	100
		MATE	: USE ADDITION	AL SHEET IF NE	CESSARY		

STOCK CORPORATION

PLEASE PRINT LEGIBLY ------

	DIR	ECTO	RS / 0	FFICER	S			
NAME/CURRENT RESIDENTIAL ADDRESS	NATIONALITY	INC'R		GENDER	STOCK HOLDER	OFFICER	EXEC. COMM.	TAX IDENTIFICATION
ESTEBAN B.UY JR #22 COLUMBIA ST., NORTHEAST GREENHILLS, SAN JUAN	Filipino	Ÿ	С	м	Y	CHAIRMAN	C/M	109-032-797
2. RAMP NIELSEN S. UY #22 COLUMBIA ST., NORTHEAST GREENHILLS, SAN JUAN	Filipino	N	М	М	Y	VICE CHAIRMAN	CA	232-386-643
3. VISITACION S. UY #22 COLUMBIA ST., NORTHEAST GREENHILLS, SAN JUAN	Filipino	Y	М	F	Υ	TREASURER	CA	243-738-442
4. CHARLEMAGNE S. UY #22 COLUMBIA ST., NORTHEAST GREENHILLS, SAN IUAN	Filipino	N	м	м	γ	N/A	N/A	248-738-448
5. KATE UY REBADULLA NO.94 GENERAL AVENUE, GSES VILLAGE, PROLB, QUEZON CITY	Filipino	N	М	F	Y	CORPORATE SECRETARY	C/N	246-486-366
6. DAHN GREIGOR S. UY #22 COLUMBIA ST., NORTHEAST	Filipino	N	М	м	Y	PRESIDENT	C/N	251-578-527
7. RAQUEL J. UY 9E BULACAN ST., WEST AVENUE, OUEZON CITY	Filipino	Υ	м	p	Υ	N/A	C/N	235-351-825
8. VIANCA PRECIOSA S. UY #22 COLUMBIA ST., NORTHEAST CREENHILLS, SAN IIIAN	Filipino	N	С	F	Y	N/A	C/N	470-135-996
9. LUCILA T. DELGADO 23C D. TUAZON ST., QUEZON CITY	Filipino	Υ	М	F	Y	N/A	N	107-966-480
ABRAHAM C. ELAMPARO 942 ALGECIRAS ST., SAMPALOC MANILA	Filipino	Y	м	м	Υ	N/A	N	107-503-493
EUGENE L. SAGCAL 30 TLR TOWNHOMES FAST TRACK ST.MOONWALK, PARAÑAQUE	Filipino	N	м	м	Y	N/A	N	116-230-326
2. FRANKLIN CHUA #3 MANGO ST., NORTHVIEW 2, QUEZON CITY	Filipino	N	м	м	Y	N/A	N	147-643-135
3.								
4.								
5.			\neg				\neg	

INSTRUCTION:

FOR SEX COLUMN, PUT "F" FOR FEMALE, "M" FOR MALE.

FOR BOARD COLUMN, PUT "C" FOR CHARMAN, "M" FOR MEMBER, "I" FOR INDEPENDENT DIRECTOR.

FOR INC'R COLUMN, PUT "Y" IF AN INCORPORATOR, "N" IF NOT.

FOR STOCKHOLDER COLUMN, PUT "Y" IF A STOCKHOLDER, "N" IF NOT.

FOR OFFICER COLUMN, INDICATE PARTICULAR POSITION IF AN OFFICER, FROM VP UP INCLUDING THE POSITION OF THE TREASURER, SECRETARY, COMPLIANCE OFFICER AND/OR ASSOCIATED PERSON.

FOR EXECUTIVE COMMITTEE, INDICATE "C" IF MEMBER OF THE COMPENSATION COMMITTEE; "A" FOR AUDIT COMMITTEE; "N" FOR NOMINATION AND ELECTION COMMITTEE. ADDITIONALLY WRITE "C" AFTER SLASH IF CHAIRMAN AND "M" IF MEMBER.

STOCK CORPORATION

CORPORATE NAME: MEDOCARE HEALTH SYSTEMS, INC. TOTAL NUMBER OF STOCKHOLDERS: NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH: 12 12 TOTAL ASSETS BASED ON LATEST AUDITED FINANCIAL STATEMENTS: STOCKHOLDER'S INFORMATION SHARES SUBSCRIBED NAME, NATIONALITY AND CURRENT AMOUNT PAID TAX IDENTIFICATION % OF AMOUNT (PhP) NUMBER RESIDENTIAL ADDRESS TYPE NUMBER OWNER-(PhP) SHIP COMMON 61,500,000,00 1 ESTEBAN B.UY IR 615,000 Filipino 109-032-797 42.71% 61,500,000.00 #22 COLUMBIA ST., NORTHEAST GREENHILLS, SAN JUAN TOTAL 615,000 61,500,000,00 23,378,000.00 2. RAMP NIELSEN S. UY COMMON 233700 Filipino 16.23% 23,370,000.00 232-386-643 #22 COLUMBIA ST., NORTHEAST GREENHILLS, SAN JUAN 233700 23,370,000.00 TOTAL COMMON 281800 28,180,000.00 3. VISITACION S. UY Filipino 19.57% 28,180,000.00 243-738-442 #22 COLUMBIA ST. NORTHEAST GREENHILLS, SAN JUAN 281,800.00 28,180,000.00 TOTAL 4. CHARLEMAGNE S. UY COMMON 31,500 3,150,000.00 Filipino 2.19% 3.150,000,00 248-738-448 #22 COLUMBIA ST. NORTHEAST GREENHILLS, SAN JUAN 31,500 3,150,000,00 TOTAL COMMON 5000 500,000.00 5. KATE UY REBADULLA Filipino 500,000.00 246-486-366 0.35% NO.94 GENERAL AVENUE, GSIS VILLAGE, PROJ.S, QUEZON CITY 500,000.00 5.000.00 TOTAL 247000 24,700,000.00 6. DAHN GREIGOR S. UY Filipino: 251-578-527 24,700,000,00 17.15% COLUMBIA ST., NORTHEAST #22 GREENHILLS, SAN JUAN 247000 24700000 TOTAL 20000 2,000,000.00 7. RAQUEL J. UY Filipino 1.39% 2,000,000.00 235-351-825 247000 9E BULACAN ST., WEST AVENUE, QUEZON CITY 2000000 1,440,000 TOTAL.

INSTRUCTION: SPECIFY THE TOP 20 STOCKHOLDERS AND INDICATE THE REST AS OTHERS

143,400,000.00

TOTAL AMOUNT OF PAID-UP CAPITAL

99.58%

TOTAL AMOUNT OF SUBSCRIBED CAPITAL

Note: For PDTC Numinee included in the list, please indicate further the beneficial owners owning more than 5% of any class of the company's voting securities. Attach separate sheet, if necessary.

143,400,000.00

GENERAL INFORMATION SHEET STOCK CORPORATION

CORPORATE NAME:	MEDOCARE H	REALTH SYSTEMS, INC.						
TOTAL NUMBER OF STOCKHOLDERS:	12		NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH: 12					
TOTAL ASSETS BASED ON LATEST AUDITED FS:								
		STOCKHOLD	ER'S INFORMATION					
		SHAR	ES SUBSCRIBED		NO. 200 (100 Luc 40)	TAX		
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP	(PbP)	IDENTIFICATION NUMBER		
8. VIANCA PRECIOSA S. UY		2,000	200,000.00					
Filipino #22 COLUMBIA ST., NORTHEAST GREENHILLS.		8		0.14%	200,000,00	470-135-996		
SAN JUAN	TOTAL	2,000	200,000.00		200,000.00	313-339-339-3		
9. LUCILA T. DELGADO		1,000	100,000.00					
Filipino 23C D. TUAZON ST., QUEZON CITY	\vdash			0.07%	100.000.00	107-966-480		
250 21 1 to the bit of 1 of the bit of 1 of 1	TOTAL	1,000	100,000.00	, , , , , , , , , , , , , , , , , , , ,	100,000.00	201.750-100		
10. ABRAHAM C ELAMPARO		1,000	100,000.00					
Filipino 942 ALGECIRAS ST., SAMPALOC MANILA				0.07%	100,000,00	107-503-493		
79E HOUSENING ST., STIMITHOUS PROPERTY	TOTAL	1,000	100,000,00	-2001000	100,000.00	201 302 173		
11. EUGENE L SAGCAL		1,000	100,000.00		100.000.00			
Filipino 30 TLR TOWNHOMES FAST TRACK				0.07%		116-230-326		
ST_MOONWALK, PARAÑAQUE	TOTAL	1,000	100,000.00		100,000.00	*********		
12. FRANKLIN CHUA		1,000	100,000.00					
Filipino #3 MANGO ST., NORTHVIEW 2, QUEZON CITY				0.07%	100,000.00	147-643-135		
NO PORTUGUES AND PROPERTY OF THE PROPERTY OF T	TOTAL	1,000	100,000.00	5,0710	100,000.00	147-043-133		
13.								
					- 1			
	TOTAL							
14.								
	_	- 4			1			
	TOTAL							
TOTAL AMOUNT OF	SUBSCRIBED	CAPITAL	600,000.00	0.42%	600,0	00.00		
7,000 to 1,000 possible to 1,0		TOTAL	AMOUNT OF PAID-UP	CAPITAL	144,000	,000.00		
LACOTED A CONTROLL	CONTRACTOR STREET	more no conserva-	MOT EVEDE AND INDICAS	NO WALL THE PARTY AND	CONTINUE			

INSTRUCTION: SPECIFY THE TOP 20 STOCKHOLDERS AND INDICATE THE REST AS OTHERS

Note: For PDTC Nominee included in the list, please indicate further the beneficial owners owning more than 5% of any class of the company's voting securities. Attach separate sheet, if necessary.

GENERAL INFORMATION SHEET STOCK CORPORATION

CORPORATE NAME:	MEDOCAL	RE HEALTH SYS	TEMS, INC.			
TOTAL NUMBER OF STOCKHOLDERS:	12		NO. OF THE CHARLES WITH E	IN THE WAVE TO A SECOND	04.	12
TOTAL ASSETS BASED ON LATEST AUDITED FS:						
		TOCKHOLDER	S INFORMATION			
		SHAR	ES SUBSCRIBED			
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP	(PhP)	TAX IDENTIFICATION NUMBER
15.	4 4					
				4		
	TOTAL			1 1		
16.						
	-			4 1		
	TOTAL			1		
17.						
	TOTAL			1		
18.				1		
				1		
	TOTAL			- 1		
19,						
	TOTAL					
20.						
	TOTAL			1		
21. OTHERS (indicate the number of the remaining stockholders)						
ALL SERVICES				1		
	TOTAL					
TOTAL AMOUNT OF	SUBSCRIBE		COURSE OF PARK HT.	0.00%	0	.00
			OUNT OF PAID-UP C			

separate sheet. If necessary.

STOCK CORPORATION

	SECTION	PLE	ASE PRINT LEGIBLY	=======	======	
CORPORATE NAME: MEDOCARE	HEALTH SYST	rems, i	INC.			
1. INVESTMENT OF CORPORATE			AMOUNT (Ph	(D)	DATE	F BOARD RESOLUTION
	.N		AMOUNT (PE	IP)	DATE	P BOARD RESOLUTION
FUNDS IN ANOTHER CORPORATIO 1.1 STOCKS	IN .				1	
1.1 310CKS						
1.2 BONDS/COMMERCIAL PAPER	(Issued					
by Private Corporations)						
1.3 LOANS/ CREDITS/ ADVANCES	,					
1.4 GOVERNMENT TREASURY BII	LLS					
1.5 OTHERS						
2. INVESTMENT OF CORPORATE FUN SECONDARY PURPOSES (PLEASE S		ries ui	NDER ITS	DATE OF BO RESOLUTI		DATE OF STOCKHOLDERS RATIFICATION
3. TREASURY SHARES				NO. OF SHA	RES	% AS TO THE TOTAL NO. OF SHARES ISSUED
4. UNRESTRICTED/UNAPPROPRIATE 5. DIVIDENDS DECLARED DURING TH TYPE OF DIVIDENS 5.1 CASH	IE IMMEDIATI		ECEDING YEAR:	LAST FISCAL YE	AR	DATE DECLARED
5.2 STOCK						
5.3 PROPERTY						
	TO	TAL	P			
6. ADDITIONAL SHARES ISSUED DUR	ING THE PERI	OD:				NF
DATE	NO. OF SH	ARES			AMOU	NT
SECONDARY LICENSE/REGISTRATION	WITH SEC AN	ID OTE	HER GOV'T AGENCY	/2		
NAME OF AGENCY:	SEC		BS			10
TYPE OF	000					
LICENSE/REGN.						
DATE ISSUED:						
DATE STARTED						
OPERATIONS:						
TOTAL ANNUAL COMPENSATION DIRECTORS DURING THE PRECEDIN YEAR (in PhP)	100 miles	TOTAL	NO. OF OFFICERS	TOTAL NO. OF		TOTAL MANPOWER COMPLEMENT

NOTE: USE ADDITIONAL SHEET IF NECESSARY

I, <u>KATE UY REBADULLA</u>, Corporate Secretary of <u>MEDOCARE HEALTH SYSTEMS</u>, <u>INC.</u> declare under penalty of perjury that all matters set forth in this GIS have been made in good faith, duly verified by me and to the best of my knowledge and belief are true and correct.

I hereby attest that all the information in this GIS are being submitted in compliance with the rules and regulations of the Securities and Exchange Commission (SEC) the collection, processing, storage and sharing of said information being necessary to carry out the functions of public authority for the performance of the constitutionally and statutorily mandated functions of the SEC as a regulatory agency.

I further attest that I have been authorized by the Board of Directors/Trustees to file this GIS with the SEC.

I understand that the Commission may place the corporation under delinquent status for failure to submit the reportorial requirements three (3) times, consecutively or intermittently, within a period of five (5) years (Section 177, RA No. 11232).

Done this 5th day of APRIL, 2022 in QUEZON CITY

(Signature over printed name)

SUBSCRIBED AND SWORN TO before me in QUEZON CITY on MAY 18, 2022 by affiant who personally appeared before me and exhibited to me his/her competent evidence of identity consisting of TIN# 246-486-366 issued at _______ on ______.

Doc. No. 04 Page No. 007 Book No. 6 Series of 2022 REBECCA S KRANCISCO

COMMISSION NO. NP-145

NOTARY PUBLIC FOR DUEZON CITY

UNTIL JUNE 30, 2022

BTM FLOOR EU STATE TOWER

30 QUEZON AVE., QUEZON CITY

ATTORNEY'S ROLL NO. 61722/05-03-2012

PTR NO. 24467*1; 01-07-2022/ QUEZON CITY

IBP LIFETIME ROLL NO. 011385; 01-10-2013; MANILA IV

MCLE COMPLIANCE NO. VI-0017279-01/24/2019

NOTARY PUBLIC

BENEFICIAL OWNERSHIP DECLARATION FOR THE YEAR: 2022

SEC REGISTRATION NUMBER: CORPORATE NAME: CS200301686 MEDOCARE HEALTH SYSTEMS, INC.

Instructions

- Identify the Beneficial Owner/s of the corporation as described in the Categories of Beneficial Ownership in items
 A to I below. List down as many as you can identify. You may use an additional sheet if necessary.
- 2. Fill in the required information on the beneficial owner in the fields provided for.
- In the "Category of Beneficial Ownership" column, indicate the letter(s) corresponding thereto. In the event that
 the person identified as beneficial owner falls under several categories, indicate all the letters corresponding to
 such categories.
- If the category is under letter "I", indicate the position held (i.e., Director/Trustee, President, Chief Executive Officer, Chief Operating Officer, Chief Financial Officer, etc.).
- 5. Do not leave any item blank. Write "N/A" if the information required is not applicable or "NONE" if non-existent.

"Beneficial Owner" refers to any natural person(s) who ultimately own(s) or control(s) or exercise(s) ultimate effective control over the corporation. This definition covers the natural person(s) who actually own or control the corporation as distinguished from the legal owners. Such beneficial ownership may be determined on the basis of the following:

Category Description

- A Natural person(s) owning, directly or indirectly or through a chain of ownership, at least twenty-five percent (25%) of the voting rights, voting shares or capital of the reporting corporation. Natural person(s) who exercise control over the reporting corporation, alone or together with others, through
- B any contract, understanding, relationship, intermediary or tiered entity.
- C Natural person(s) having the ability to elect a majority of the board of directors/trustees, or any similar body, of the corporation.
- D Natural person(s) having the ability to exert a dominant influence over the management or policies of the corporation.
- E Natural person(s) whose directions, instructions, or wishes in conducting the affairs of the corporation are carried out by majority of the members of the board of directors of such corporation who are accustomed or under an obligation to act in accordance with such person's directions, instructions or wishes.
- F Natural person(s) acting as stewards of the properties of corporations, where such properties are under the care or administration of said natural person(s).
- G Natural person(s) who actually own or control the reporting corporation through nominee shareholders or nominee directors acting for or on behalf of such natural persons.
- H Natural person(s) ultimately owning or controlling or exercising ultimate effective control over the corporation through other means not falling under any of the foregoing categories.
- Natural person(s) exercising control through positions held within a corporation (i.e., responsible for strategic decisions that fundamentally affect the business practices or general direction of the corporation such as the members of the board of directors or trustees or similar body within the corporation; or exercising executive control over the daily or regular affairs of the corporation through a senior management position). This category is only applicable in exceptional cases where no natural person is identifiable who ultimately owns or exerts control over the corporation, the reporting corporation having exhausted all reasonable means of identification

COMPLETE NAME (Surname, Given Name, Middle Name, Name Extension (i.e., Jr., Sr., III)	SPECIFIC RESIDENTIAL ADDRESS	NATIONALITY	DATE OF BIRTH	TAX IDENTIFICATION NO.	% OF OWNERSHIP ¹ / % OF VOTING RIGHTS ²	TYPE OF BENEFICIAL OWNER ³ Direct (D) or Indirect (I)	CATEGORY OF BENEFICIAL OWNERSHIP
ESTEBAN B.UY JR	#J2 COLUMBIA ST., NORTHEAST GREENHILLS, SAN JUAN	Filipino	3/29/1952	109-032-797	42.71%	D	1

Note: This page is not for uploading on the SEC iView.

GIS_FOREIGN (v.2020)
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¹ For Stock Corporations.

² For Non-Stock Corporations.

³ For Stock Corporations.

GIS_FOREIGN (v.2020)