



# SECURITIES AND EXCHANGE COMMISSION

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**The following document has been received:**

**Receiving:** Jyrod Genova

**Receipt Date and Time:** July 30, 2024 11:01:24 AM

## Company Information

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**SEC Registration No.:** CS201200281

**Company Name:** MEDICARE PLUS, INC.

**Industry Classification:** L75120

**Company Type:** Stock Corporation

## Document Information

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**Document ID:** OST10730202482834971

**Document Type:** GENERAL\_INFORMATION\_SHEET

**Document Code:** GIS

**Period Covered:** June 26, 2024

**Submission Type:** Annual Meeting

**Remarks:** None

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

# GENERAL INFORMATION SHEET (GIS)

FOR THE YEAR 2024

## 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.
2. 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 CORPORATION.
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 OCCURED OR BECAME EFFECTIVE.
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 ONLY ONE SIDE
6. **ONLY THE GIS ACCOMPLISHED IN ACCORDANCE WITH THESE INSTRUCTIONS SHALL BE CONSIDERED AS HAVING BEEN FILED.**
7. 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 LEGIBLY =====

<b>CORPORATE NAME:</b>  MEDICARE PLUS, INC.			<b>DATE REGISTERED:</b>  1/10/2012
<b>BUSINESS/TRADE NAME:</b>  MEDICARE PLUS, INC.			<b>FISCAL YEAR END:</b>
<b>SEC REGISTRATION NUMBER:</b>  CS201200281			<b>DECEMBER 31</b>
<b>DATE OF ANNUAL MEETING PER BY-LAWS:</b>  ANY DAY BEFORE JUNE 30			<b>CORPORATE TAX IDENTIFICATION NUMBER (TIN)</b>  008-192-135-000
<b>ACTUAL DATE OF ANNUAL MEETING:</b>  JUNE 26, 2024			<b>WEBSITE/URL ADDRESS:</b>  <a href="http://www.medicareplus.com.ph">www.medicareplus.com.ph</a>
<b>COMPLETE PRINCIPAL OFFICE ADDRESS:</b>  4F2 8101 Pearl Plaza, Pearl Drive, Ortigas Center, Pasig City			<b>E-MAIL ADDRESS:</b>  <a href="mailto:customerservice@medicareplus.com.ph">customerservice@medicareplus.com.ph</a>
<b>COMPLETE BUSINESS ADDRESS:</b>  34th Floor., The Orient Square Building, F. Ortigas Jr. Road, Ortigas Center, Pasig City			<b>FAX NUMBER:</b>  N/A
<b>OFFICIAL E-MAIL ADDRESS</b>  <a href="mailto:arvinmaceda@medicareplus.com.ph">arvinmaceda@medicareplus.com.ph</a>	<b>ALTERNATE E-MAIL ADDRESS</b>  <a href="mailto:admin@medicareplusinc.com">admin@medicareplusinc.com</a>	<b>OFFICIAL MOBILE NUMBER</b>  09088158780	<b>ALTERNATE MOBILE NUMBER</b>  09985611846
<b>NAME OF EXTERNAL AUDITOR &amp; ITS SIGNING PARTNER:</b>  ONG, NOCEJA & ASSOCIATES		<b>SEC ACCREDITATION NUMBER (if applicable):</b>  9308	<b>TELEPHONE NUMBER(S):</b>  (02) 8658 3079
<b>PRIMARY PURPOSE/ACTIVITY/INDUSTRY PRESENTLY ENGAGED IN:</b>  HEALTH SERVICE PROVIDER/HEALTH MAINTENANCE ORGANIZATION		<b>INDUSTRY CLASSIFICATION:</b>  86129	<b>GEOGRAPHICAL CODE:</b>  1381200019

### ===== INTERCOMPANY AFFILIATIONS =====

PARENT COMPANY	SEC REGISTRATION NO.	ADDRESS
N/A	N/A	N/A
SUBSIDIARY/AFFILIATE	SEC REGISTRATION NO.	ADDRESS
PharmaCare Plus, Inc.	2023060102907-00	34th Floor., The Orient Square Building, F. Ortigas Jr. Road, Ortigas Center, Pasig City
Dialysis Care Plus, Inc.	20230100082340-13	Lot 7 Blk 10 Shaw Boulevard, Kapitolyo, Pasig City
Metro Sanitas Corporation doing business under the name and style of Keralty Clinic	CS2021620217	10/F MGO Building, Legazpi cor, De la Rosa Sts. Legazpi Village, Makati City
Keralty Manila Inc.	CS200615579	3/F Met Live, Metro Park, Macapagal Blvd. Cor Edsa Extension, Pasay City
The MegaClinic Inc.	CS200615579	Unit 552-A, 5/F SM Megamall Edsa Cor. Dona Julia Vargas Ave. Mandaluyong City

NOTE: USE ADDITIONAL SHEET IF NECESSARY

===== PLEASE PRINT LEGIBLY =====

Corporate Name:

MEDICARE PLUS, INC.

**A. Is the Corporation a covered person under the Anti Money Laundering Act (AMLA), as amended? (Rep. Acts. 9160/9164/10167/10365)**

☒ Yes    ☐ No

Please check the appropriate box:

1.

- ☐ a. Banks  
☐ b. Offshore Banking Units  
☐ c. Quasi-Banks  
☐ d. Trust Entities  
☐ e. Non-Stock Savings and Loan Associations  
☐ f. Pawnshops  
☐ g. Foreign Exchange Dealers  
☐ h. Money Changers  
☐ i. Remittance Agents  
☐ j. Electronic Money Issuers  
☐ k. Financial Institutions which Under Special Laws are subject to Bangko Sentral ng Pilipinas' (BSP) supervision and/or regulation, including their subsidiaries and affiliates.

4. ☐ Jewelry dealers in precious metals, who, as a business, trade in precious metals

5. ☐ Jewelry dealers in precious stones, who, as a business, trade in precious stone

6. Company service providers which, as a business, provide any of the following services to third parties:

- ☐ a. acting as a formation agent of juridical persons  
☐ b. acting as (or arranging for another person to act as) a director or corporate secretary of a company, a partner of a partnership, or a similar position in relation to other juridical persons  
☐ c. providing a registered office, business address or accommodation, correspondence or administrative address for a company, a partnership or any other legal person or arrangement  
☐ d. acting as (or arranging for another person to act as) a nominee shareholder for another person

2.

- ☐ a. Insurance Companies  
☐ b. Insurance Agents  
☐ c. Insurance Brokers  
☐ d. Professional Reinsurers  
☐ e. Reinsurance Brokers  
☐ f. Holding Companies  
☐ g. Holding Company Systems  
☐ h. Pre-need Companies  
☐ i. Mutual Benefit Association  
☒ j. All Other Persons and entities supervised and/or regulated by the Insurance Commission (IC)

3.

- ☐ a. Securities Dealers  
☐ b. Securities Brokers  
☐ c. Securities Salesman  
☐ d. Investment Houses  
☐ e. Investment Agents and Consultants  
☐ f. Trading Advisors  
☐ g. Other entities managing Securities or rendering similar services  
☐ h. Mutual Funds or Open-end Investment Companies  
☐ i. Close-end Investment Companies  
☐ j. Common Trust Funds or Issuers and other similar entities  
☐ k. Transfer Companies and other similar entities  
☐ l. Other entities administering or otherwise dealing in currency, commodities or financial derivatives based there on  
☐ m. Entities administering or otherwise dealing in valuable objects  
☐ n. Entities administering or otherwise dealing in cash Substitutes and other similar monetary instruments or property supervised and/or regulated by the Securities and Exchange Commission (SEC)

7. Persons who provide any of the following services:

- ☐ a. managing of client money, securities or other assets  
☐ b. management of bank, savings or securities accounts  
☐ c. organization of contributions for the creation, operation or management of companies  
☐ d. creation, operation or management of juridical persons or arrangements, and buying and selling business entities

8. ☒ None of the above

Describe nature of business:

Health Maintenance Organization

**B. Has the Corporation complied with the requirements on Customer Due Diligence (CDD) or Know Your Customer (KYC), record-keeping, and submission of reports under the AMLA, as amended, since the last filing of its GIS?**

☒ Yes    ☐ No



# GENERAL INFORMATION SHEET

## STOCK CORPORATION

PLEASE PRINT LEGIBLY

<b>CORPORATE NAME:</b>								<b>MEDICARE PLUS, INC.</b>							
<b>CAPITAL STRUCTURE</b>															
<b>AUTHORIZED CAPITAL STOCK</b>															
		<b>TYPE OF SHARES *</b>		<b>NUMBER OF SHARES</b>		<b>PAR/STATED VALUE</b>		<b>AMOUNT (PhP) (No. of shares X Par/Stated Value)</b>							
		COMMON		50,000,000		1		50,000,000.00							
<b>TOTAL</b>				<b>50,000,000</b>		<b>TOTAL P</b>				<b>50,000,000.00</b>					
<b>SUBSCRIBED CAPITAL</b>															
<b>FILIPINO</b>		<b>NO. OF STOCK-HOLDERS</b>		<b>TYPE OF SHARES *</b>		<b>NUMBER OF SHARES</b>		<b>NUMBER OF SHARES IN THE HANDS OF THE PUBLIC **</b>		<b>PAR/STATED VALUE</b>		<b>AMOUNT (PhP)</b>		<b>% OF OWNERSHIP</b>	
		11		COMMON		50,000,000				1.00		50,000,000.00		100.00	
<b>TOTAL</b>				<b>50,000,000</b>		<b>TOTAL</b>				<b>TOTAL P</b>		<b>50,000,000.00</b>			
<b>FOREIGN (INDICATE BY NATIONALITY)</b>		<b>NO. OF STOCK-HOLDERS</b>		<b>TYPE OF SHARES *</b>		<b>NUMBER OF SHARES</b>		<b>NUMBER OF SHARES IN THE HANDS OF THE PUBLIC **</b>		<b>PAR/STATED VALUE</b>		<b>AMOUNT (PhP)</b>		<b>% OF OWNERSHIP</b>	
N/A		N/A		N/A		N/A		N/A		N/A		N/A		N/A	
<b>Percentage of Foreign Equity :</b>						<b>TOTAL</b>		<b>TOTAL</b>		<b>TOTAL P</b>					
										<b>TOTAL SUBSCRIBED P</b>					
<b>PAID-UP CAPITAL</b>															
<b>FILIPINO</b>		<b>NO. OF STOCK-HOLDERS</b>		<b>TYPE OF SHARES *</b>		<b>NUMBER OF SHARES</b>		<b>PAR/STATED VALUE</b>		<b>AMOUNT (PhP)</b>		<b>% OF OWNERSHIP</b>			
		11		COMMON		50,000,000		1		50,000,000.00		100.00			
<b>TOTAL</b>				<b>50,000,000</b>		<b>TOTAL P</b>									
<b>FOREIGN (INDICATE BY NATIONALITY)</b>		<b>NO. OF STOCK-HOLDERS</b>		<b>TYPE OF SHARES *</b>		<b>NUMBER OF SHARES</b>		<b>PAR/STATED VALUE</b>		<b>AMOUNT (PhP)</b>		<b>% OF OWNERSHIP</b>			
N/A		N/A		N/A		N/A		N/A		N/A		N/A			
<b>0.00 %</b>						<b>TOTAL</b>		<b>TOTAL P</b>							
								<b>TOTAL PAID-UP P</b>		<b>50,000,000.00</b>					

NOTE: USE ADDITIONAL SHEET IF NECESSARY

\* Common, Preferred or other classification

\*\* Other than Directors, Officers, Shareholders owning 10% of outstanding shares.

# GENERAL INFORMATION SHEET

## STOCK CORPORATION

PLEASE PRINT LEGIBLY

CORPORATE NAME:		MEDICARE PLUS, INC.						
DIRECTORS / OFFICERS								
NAME/CURRENT RESIDENTIAL ADDRESS	NATIONALITY	INC'R	BOARD	GENDER	STOCK HOLDER	OFFICER	EXEC. COMM.	TAX IDENTIFICATION NUMBER
1. <b>MARIA JESUSA VIRAY</b> P1 RESIDENCIA8888 PEARL DRIVE San Antonio CITY OF PASIG,SECOND DISTRICT, NCR, Philippines, 1605	FILIPINO	N	C	F	Y	PRESIDENT/ CEO	A/E/C	112-185-579
2. <b>MICHAEL FRANCISCO</b> 576 RAMON MAGSAYSAY Manggahan CITY OF PASIG, SECOND DISTRICT,	FILIPINO	N	M	M	Y	INDEPENDENT DIRECTOR		225-315-249
3. <b>JANE CHRISTINE SOCO</b> 2430 MORSE San Isidro CITY OF MAKATI, FOURTH DISTRICT, NCR Philippines, 1234	FILIPINO	N	M	F	Y	TREASURER /COO/DIRECTOR	A/E/M	186-612-840
4. <b>MARC JASON JALANDONI</b> 127 4TH ST. NEW MANILA, QUEZON CITY	FILIPINO	N	M	M	Y	VP-BUSINESS DEV'T/DIRECTOR	A/E/M	201-144-444
5. <b>ARVIN A. MACEDA</b> 26F TOWER B THE PEARL PLACE PEARL DRIVE, SAN ANTONIO, PASIG	FILIPINO	N	M	M	Y	CORPORATE SECRETARY/ DIRECTOR	A/E/M	474-762-419
6. <b>GERARD SEAN NOEL H. RODRIGUEZ</b> 36 A Pacific Plaza Condo, Apartment Ridge Road, Urdaneta, Makati City	FILIPINO	N	M	M	Y	CPO/DIRECTOR	A/E/M	709-482-920
7. <b>MA. KARLA DENISE M. FRIAS</b> 19 Rafael Recto St. CHV2 BF HOMES, PARANAQUE CITY	FILIPINO	N	M	F	N	VP- LEGAL/DIRECTOR		234-206-906
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								

INSTRUCTION:

FOR SEX COLUMN, PUT "F" FOR FEMALE, "M" FOR MALE.  
 FOR BOARD COLUMN, PUT "C" FOR CHAIRMAN, "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.

**GENERAL INFORMATION SHEET**  
**STOCK CORPORATION**

===== PLEASE PRINT LEGIBLY =====

<b>CORPORATE NAME:</b> MEDICARE PLUS, INC.	
<b>TOTAL NUMBER OF STOCKHOLDERS: 11</b>	<b>NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH: 8</b>
<b>TOTAL ASSETS BASED ON LATEST AUDITED FINANCIAL STATEMENTS:</b>	<b>51,442,418.00</b>

**STOCKHOLDER'S INFORMATION**

NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP)	TAX IDENTIFICATION NUMBER
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER-SHIP		
1. MARIA JESUSA VIRAY  FILIPINO  P1 RESIDENCIA8888 PEARL DRIVE San Antonio CITY OF PASIG, SECOND DISTRICT, NCR, Philippines, 1605	COMMON	31,297,498	31,297,498	62.59%	31,297,498.00	112-185-579
	TOTAL	31,297,498	31,297,498.00			
2. MICHAEL FRANCISCO  FILIPINO  576 RAMON MAGSAYSAY Manggahan CITY OF PASIG, SECOND DISTRICT, NCR, Philippines, 1611	COMMON	502,500	502,500	1.01%	502,500.00	225-315-429
	TOTAL	502,500	502,500.00			
3. JANE CHRISTINE SOCO  FILIPINO  2430 MORSE San Isidro CITY OF MAKATI, FOURTH DISTRICT, NCR, Philippines, 1234	COMMON	6,000,000	6,000,000.00	12.00%	6,000,000.00	186-612-840
	TOTAL	6,000,000	6,000,000.00			
4. MA. KARLA DENISE M. FRIAS  FILIPINO  19 Rafael Recto St. CHV2 BF HOMES, PARANAQUE CITY	COMMON	1	1.00	0.00%	1.00	234-206-906
	TOTAL	1	1.00			
5. ARVIN A. MACEDA  FILIPINO  26F TOWER B THE PEARL PLACE, PEARL DRIVE, SAN ANTONIO, PASIG CITY	COMMON	1	1.00	0.00%	1.00	474-762-419
	TOTAL	1	1.00			
6. DR. FRANCIS LUKE PIEDAD  FILIPINO  19 ROAD 1 HIGHWAWY HILLS SUBD. MANDALUYONG CITY	COMMON	1,200,000	1,200,000.00	2.40%	1,200,000.00	132-018-660
	TOTAL	1,200,000	1,200,000.00			
7. MARC JASON JALANDONI  FILIPINO  127 4TH ST. NEW MANILA, QUEZON CITY	COMMON	5,000,000	5,000,000.00	10.00%	5,000,000.00	201-144-444
	TOTAL	5,000,000	5,000,000.00			
TOTAL AMOUNT OF SUBSCRIBED CAPITAL				100.00%	50,000,000.00	
TOTAL AMOUNT OF PAID-UP CAPITAL						

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**

===== PLEASE PRINT LEGIBLY =====

<b>CORPORATE NAME:</b> MEDICARE PLUS, INC.						
<b>TOTAL NUMBER OF STOCKHOLDERS:</b> 11				<b>NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH:</b> 8		
<b>TOTAL ASSETS BASED ON LATEST AUDITED FS:</b> 51,442,418.00						
STOCKHOLDER'S INFORMATION						
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP)	TAX IDENTIFICATION NUMBER
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER-SHIP		
8. CELESTINO F. MERCADER, JR FILIPINO A-3 PINE ST., GREENHEIGHTS GARDEN VILLAGE, CP GARCIA HIGHWAY, BUHANGIN, DAVAO CITY	COMMON	500,000	500,000.00	1.00%	500,000.00	159-271-199
	TOTAL	500,000	500,000.00			
9. MARK JARDIEL YAMBOT FILIPINO 38 D WEST TOWER ONE SERENDRA 11TH AVE., BGC TAGUIG CITY	COMMON	500,000	500,000.00	1.00%	500,000.00	110-126-782
	TOTAL	500,000	500,000.00			
10. AKHIRA INC. FILIPINO 3rd Floor, BSC Prime Building, 2297 Chino Roces Avenue Extension, Magallanes, Makati City  BENEFICIAL OWNER: GERARD SEAN NOEL H. RODRIGUEZ	COMMON	4,999,999	4,999,999.00	10.00%	4,999,999.00	
	TOTAL	4,999,999	4,999,999.00			
11. GERARD SEAN NOEL H. RODRIGUEZ FILIPINO 36 A PACIFIC PLAZA CONDO APARTMENT RIDGE ROAD, URDANETA, MAKATI CITY	COMMON	1	1.00	0.00%	1.00	709-482-920
	TOTAL	1	1.00			
12.						
	TOTAL					
13.	***NOTHING FOLLOWS***					
	TOTAL					
14.						
	TOTAL					
<b>TOTAL AMOUNT OF SUBSCRIBED CAPITAL</b>				<b>100.00%</b>	<b>50,000,000.00</b>	
<b>TOTAL AMOUNT OF PAID-UP CAPITAL</b>						
INSTRUCTION: SPECIFY THE TOP 20 STOCKHOLDERS AND INDICATE THE REST AS OTHERS						
<i>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.</i>						

**GENERAL INFORMATION SHEET  
STOCK CORPORATION**

===== PLEASE PRINT LEGIBLY =====

<b>CORPORATE NAME:</b>		MEDICARE PLUS, INC.					
<b>TOTAL NUMBER OF STOCKHOLDERS:</b>		11		<b>NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH:</b>		8	
<b>TOTAL ASSETS BASED ON LATEST AUDITED FS:</b>		51,442,418.00					
<b>STOCKHOLDER'S INFORMATION</b>							
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP)	TAX IDENTIFICATION NUMBER	
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER-SHIP			
15.	***PAGE INTENTIONALLY LEFT BLANK***						
	<b>TOTAL</b>						
16.							
	<b>TOTAL</b>						
17.							
	<b>TOTAL</b>						
18.							
	<b>TOTAL</b>						
19.							
	<b>TOTAL</b>						
20.							
	<b>TOTAL</b>						
21. OTHERS (Indicate the number of the remaining stockholders)							
	<b>TOTAL</b>						
<b>TOTAL AMOUNT OF SUBSCRIBED CAPITAL</b>					100.00%	<b>50,000,000.00</b>	
<b>TOTAL AMOUNT OF PAID-UP CAPITAL</b>							
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**

===== PLEASE PRINT LEGIBLY =====			
<b>CORPORATE NAME:</b>			
MEDICARE PLUS, INC.			
<b>1. INVESTMENT OF CORPORATE FUNDS IN ANOTHER CORPORATION</b>	<b>AMOUNT (PhP)</b>	<b>DATE OF BOARD RESOLUTION</b>	
<b>1.1 STOCKS</b>	Dialysis Care Plus, Inc.- PHP 1,124,999	Jan. 17, 2023	
	PharmaCare Plus, Inc.- PHP 4,99,993	Mar. 29, 2023	
<b>1.2 BONDS/COMMERCIAL PAPER (Issued by Private Corporations)</b>	N/A	N/A	
<b>1.3 LOANS/ CREDITS/ ADVANCES</b>	N/A	N/A	
<b>1.4 GOVERNMENT TREASURY BILLS</b>	12,500,000.00	March 29, 2023	
<b>1.5 OTHERS</b>	N/A	N/A	
<b>2. INVESTMENT OF CORPORATE FUNDS IN ACTIVITIES UNDER ITS SECONDARY PURPOSES (PLEASE SPECIFY:)</b>		<b>DATE OF BOARD RESOLUTION</b>	<b>DATE OF STOCKHOLDERS RATIFICATION</b>
N/A		N/A	N/A
<b>3. TREASURY SHARES</b>		<b>NO. OF SHARES</b>	<b>% AS TO THE TOTAL NO. OF SHARES ISSUED</b>
N/A		N/A	N/A
<b>4. UNRESTRICTED/UNAPPROPRIATED RETAINED EARNINGS AS OF END OF LAST FISCAL YEAR</b>		PHP 28,886,310.27	
<b>5. DIVIDENDS DECLARED DURING THE IMMEDIATELY PRECEDING YEAR:</b>		0	
<b>TYPE OF DIVIDEND</b>	<b>AMOUNT (PhP)</b>	<b>DATE DECLARED</b>	
<b>5.1 CASH</b>	0.00	N/A	
<b>5.2 STOCK</b>	0.00	N/A	
<b>5.3 PROPERTY</b>	0.00	N/A	
<b>TOTAL</b>			
<b>6. ADDITIONAL SHARES ISSUED DURING THE PERIOD:</b>		30,000,000	
<b>DATE</b>	<b>NO. OF SHARES</b>	<b>AMOUNT</b>	
N/A	N/A	N/A	
<b>SECONDARY LICENSE/REGISTRATION WITH SEC AND OTHER GOV'T AGENCY:</b>			
<b>NAME OF AGENCY:</b>	<b>SEC</b>	<b>B S P</b>	<b>I C</b>
<b>TYPE OF LICENSE/REGN.</b>	N/A	N/A	HMO-2023-21-R
<b>DATE ISSUED:</b>	N/A	N/A	**renewal of original issued secondary license with the IC**
<b>DATE STARTED OPERATIONS:</b>	N/A	N/A	**renewal of original issued secondary license with the IC**
<b>TOTAL ANNUAL COMPENSATION OF DIRECTORS DURING THE PRECEDING FISCAL YEAR (in PhP)</b>	<b>TOTAL NO. OF OFFICERS</b>	<b>TOTAL NO. OF RANK &amp; FILE EMPLOYEES</b>	<b>TOTAL MANPOWER COMPLEMENT</b>
4,453,200.00	7	101	124

NOTE: USE ADDITIONAL SHEET IF NECESSARY

I, **ARVIN MACEDA**, Corporate Secretary of **MEDICARE PLUS, INC.** 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).

**JUL 09 2024**

Done this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in **PASIG CITY**.

**ARVIN A MACEDA**

(Signature over printed name)

**SUBSCRIBED AND SWORN TO** before me in **PASIG CITY** on **JUL 09 2024** by affiant who personally appeared before me and exhibited to me his/her competent evidence of identity consisting of \_\_\_\_\_ issued at \_\_\_\_\_ on \_\_\_\_\_.

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**ATTY. JOMAR M. HIZOLA**  
**NOTARY PUBLIC**

Cities of Pasig, San Juan and Pateros, Metro Manila  
21k Strata 100 Bldg., Don F. Ortigas St., Pasig City  
Appointment No. 150; Until Dec. 31, 2024  
SC. Roll No. 81022/ 05-21-2022  
IBP No. 423716 / 01/16/2024; IBP Manila 1  
PTR No. 1716816 / 01/16/2024; Pasig City  
MCLE No. VIII-0006903 02/20/2024-04/14/2028

**BENEFICIAL OWNERSHIP DECLARATION****FOR THE YEAR: 2024****SEC REGISTRATION NUMBER:****CS201200281****CORPORATE NAME:****MEDICARE PLUS, INC.****Instructions:**

1. 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.
3. 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. ja
4. 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.
- B** Natural person(s) who exercise control over the reporting corporation, alone or together with others, through 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.
- I** 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 and provided there are no grounds for suspicion.

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 <sup>1</sup> / % OF VOTING RIGHTS <sup>2</sup>	TYPE OF BENEFICIAL OWNER <sup>3</sup>  Direct (D) or Indirect (I)	CATEGORY OF BENEFICIAL OWNERSHIP
VIRAY, MARIA JESUSA B.	RESIDENCIA8888, P1 PEARL DRIVE, San Antonio, Pasig City	FILIPINO	12/17/1969	112-185-579	62.59%	D	A,C,D,E
JALANDONI, MARC JASON, MONTINOLA	127 4TH ST. NEW MANILA, QUEZON CITY	FILIPINO	02/18/1979	201-144-444	10%	D	C,D,E,I
SOCO, JANE CHRISTINE	2430 MORSE, San Isidro, City of Makati, Fourth	FILIPINO	07/25/1973	186-612-840	12%	D	C,D,E,I

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

<sup>1</sup>For Stock Corporations.

<sup>2</sup>For Non-Stock Corporations.

<sup>3</sup>For Stock Corporations.