



SECURITIES AND EXCHANGE COMMISSION

Secretariat Building, PICC Complex, Roxas Boulevard, Pasay City, 1307 Metro Manila Philippines

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The following document has been received:

Receiving: Mark Anthony Oseña

Receipt Date and Time: November 12, 2025 02:14:32 PM

Company Information

SEC Registration No.: CS201200281

Company Name: MEDICARE PLUS, INC.

Industry Classification: L75120

Company Type: Stock Corporation

Document Information

Document ID: OST11112202583815411

Document Type: GENERAL_INFORMATION_SHEET

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Period Covered: November 07, 2025

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Remarks: None

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

GENERAL INFORMATION SHEET (GIS)

FOR THE YEAR 2025 (AMENDED)

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 =====

CORPORATE NAME:			DATE REGISTERED:
MEDICARE PLUS, INC.			1/10/2012
BUSINESS/TRADE NAME:			FISCAL YEAR END:
MEDICARE PLUS, INC.			DECEMBER 31
SEC REGISTRATION NUMBER:			CORPORATE TAX IDENTIFICATION NUMBER (TIN)
CS201200281			008-192-135-000
DATE OF ANNUAL MEETING PER BY-LAWS:			WEBSITE/URL ADDRESS:
ANY DAY BEFORE JUNE 30			www.medicareplus.com.ph
ACTUAL DATE OF ANNUAL MEETING:			E-MAIL ADDRESS:
November 7, 2025			customerservice@medicareplus.com.ph
COMPLETE PRINCIPAL OFFICE ADDRESS:			FAX NUMBER:
34th Floor., The Orient Square Building, F. Ortigas Jr. Road, Ortigas Center, Pasig City			N/A
COMPLETE BUSINESS ADDRESS:			
34th Floor., The Orient Square Building, F. Ortigas Jr. Road, Ortigas Center, Pasig City			
OFFICIAL E-MAIL ADDRESS	ALTERNATE E-MAIL ADDRESS	OFFICIAL MOBILE NUMBER	ALTERNATE MOBILE NUMBER
arvinmaceda@medicareplus.com.ph	admin@medicareplusinc.com	09088158780	09985611846
NAME OF EXTERNAL AUDITOR & ITS SIGNING PARTNER:		SEC ACCREDITATION NUMBER (if applicable):	TELEPHONE NUMBER(S):
Roxas Tabamo & Co.		119212	(02) 8658 3079
PRIMARY PURPOSE/ACTIVITY/INDUSTRY PRESENTLY ENGAGED IN:		INDUSTRY CLASSIFICATION:	GEOGRAPHICAL CODE:
HEALTH SERVICE PROVIDER/HEALTH MAINTENANCE ORGANIZATION		86129	1381200019

===== INTERCOMPANY AFFILIATIONS =====

PARENT COMPANY	SEC REGISTRATION NO.	ADDRESS
N/A	N/A	N/A
SUBSIDIARY/AFFILIATE	SEC REGISTRATION NO.	ADDRESS
N/A	N/A	N/A

NOTE: USE ADDITIONAL SHEET IF NECESSARY

GENERAL INFORMATION SHEET STOCK CORPORATION ===== PLEASE PRINT LEGIBLY =====		
Corporate Name:	MEDICARE PLUS, INC.	
A. Is the Corporation a covered person under the Anti Money Laundering Act (AML), as amended? (Rep. Acts. 9160/9164/10167/10365) <input checked="" type="radio"/> Yes <input type="radio"/> No		
Please check the appropriate box:		
1. <input type="checkbox"/> a. Banks <input type="checkbox"/> b. Offshore Banking Units <input type="checkbox"/> c. Quasi-Banks <input type="checkbox"/> d. Trust Entities <input type="checkbox"/> e. Non-Stock Savings and Loan Associations <input type="checkbox"/> f. Pawnshops <input type="checkbox"/> g. Foreign Exchange Dealers <input type="checkbox"/> h. Money Changers <input type="checkbox"/> i. Remittance Agents <input type="checkbox"/> j. Electronic Money Issuers <input type="checkbox"/> k. Financial Institutions which Under Special Laws are subject to Bangko Sentral ng Pilipinas' (BSP) supervision and/or regulation, including their subsidiaries and affiliates.	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 4. <input type="checkbox"/> Jewelry dealers in precious metals, who, as a business, trade in precious metals </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 5. <input type="checkbox"/> Jewelry dealers in precious stones, who, as a business, trade in precious stone </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 6. Company service providers which, as a business, provide any of the following services to third parties: </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <input type="checkbox"/> a. acting as a formation agent of juridical persons <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> d. acting as (or arranging for another person to act as) a nominee shareholder for another person </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 7. Persons who provide any of the following services: </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <input type="checkbox"/> a. managing of client money, securities or other assets <input type="checkbox"/> b. management of bank, savings or securities accounts <input type="checkbox"/> c. organization of contributions for the creation, operation or management of companies <input type="checkbox"/> d. creation, operation or management of juridical persons or arrangements, and buying and selling business entities </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> 8. <input checked="" type="checkbox"/> None of the above </div> <div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; border-right: 1px solid black; padding-right: 5px; width: 20%;"> Describe nature of business: </div> <div style="padding-left: 10px;"> Health Maintenance Organization </div> </div>	
2. <input type="checkbox"/> a. Insurance Companies <input type="checkbox"/> b. Insurance Agents <input type="checkbox"/> c. Insurance Brokers <input type="checkbox"/> d. Professional Reinsurers <input type="checkbox"/> e. Reinsurance Brokers <input type="checkbox"/> f. Holding Companies <input type="checkbox"/> g. Holding Company Systems <input type="checkbox"/> h. Pre-need Companies <input type="checkbox"/> i. Mutual Benefit Association <input checked="" type="checkbox"/> j. All Other Persons and entities supervised and/or regulated by the Insurance Commission (IC)		
3. <input type="checkbox"/> a. Securities Dealers <input type="checkbox"/> b. Securities Brokers <input type="checkbox"/> c. Securities Salesman <input type="checkbox"/> d. Investment Houses <input type="checkbox"/> e. Investment Agents and Consultants <input type="checkbox"/> f. Trading Advisors <input type="checkbox"/> g. Other entities managing Securities or rendering similar services <input type="checkbox"/> h. Mutual Funds or Open-end Investment Companies <input type="checkbox"/> i. Close-end Investment Companies <input type="checkbox"/> j. Common Trust Funds or Issuers and other similar entities <input type="checkbox"/> k. Transfer Companies and other similar entities <input type="checkbox"/> l. Other entities administering or otherwise dealing in currency, commodities or financial derivatives based there on <input type="checkbox"/> m. Entities administering of otherwise dealing in valuable objects <input type="checkbox"/> 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)		
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?		<input checked="" type="radio"/> Yes <input type="radio"/> No

GENERAL INFORMATION SHEET

STOCK CORPORATION

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

CORPORATE NAME:								MEDICARE PLUS, INC.							
CAPITAL STRUCTURE															
AUTHORIZED CAPITAL STOCK															
		TYPE OF SHARES *		NUMBER OF SHARES		PAR/STATED VALUE		AMOUNT (PhP) (No. of shares X Par/Stated Value)							
		COMMON		200,000,000		1		200,000,000.00							
		-----		-----		-----		-----							
		-----		-----		-----		-----							
TOTAL				200,000,000		TOTAL P				200,000,000.00					
SUBSCRIBED CAPITAL															
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 OWNERSHIP	
		13		COMMON		119,999,999				1.00		119,999,999.00		100.00	
		-----		-----		-----		-----		-----		-----		-----	
		-----		-----		-----		-----		-----		-----		-----	
TOTAL				119,999,999		TOTAL		TOTAL P		119,999,999.00				100.00	
FOREIGN (INDICATE BY NATIONALITY)		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 OWNERSHIP	
BRITISH		1		COMMON		1		N/A		1		1		0.00	
-----		-----		-----		-----		-----		-----		-----		-----	
-----		-----		-----		-----		-----		-----		-----		-----	
-----		-----		-----		-----		-----		-----		-----		-----	
Percentage of Foreign Equity :				TOTAL		1		TOTAL		TOTAL P		1.00			
										TOTAL P		0.00			
TOTAL SUBSCRIBED										P					
PAID-UP CAPITAL															
FILIPINO		NO. OF STOCK-HOLDERS		TYPE OF SHARES *		NUMBER OF SHARES		PAR/STATED VALUE		AMOUNT (PhP)		% OF OWNERSHIP			
		13		COMMON		119,999,999		1		119,999,999.00		100.00			
		-----		-----		-----		-----		-----		-----			
		-----		-----		-----		-----		-----		-----			
TOTAL				119,999,999		TOTAL P				119,999,999.00					
FOREIGN (INDICATE BY NATIONALITY)		NO. OF STOCK-HOLDERS		TYPE OF SHARES *		NUMBER OF SHARES		PAR/STATED VALUE		AMOUNT (PhP)		% OF OWNERSHIP			
BRITISH		1		COMMON		1		1		1		0.00			
-----		-----		-----		-----		-----		-----		-----			
-----		-----		-----		-----		-----		-----		-----			
TOTAL				1		TOTAL P									
						TOTAL PAID-UP P				120,000,000.00					
										100.00					

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. MARIA JESUSA VIRAY P1 RESIDENCIA8888, PEARL DRIVE, SAN ANTONIO, CITY OF PASIG, SECOND DISTRICT, NCR	FILIPINO	N	M	F	Y	PRESIDENT/CEO	A/E/C	112-185-579
2. DR. FRANCIS LUKE PIEDAD 19 ROAD 1 HIGHWAY HILLS SUBD. MANDALUYONG CITY	FILIPINO	N	M	M	Y	INDEPENDENT DIRECTOR		132-018-660
3. JANE CHRISTINE SOCO 2430 MORSE SAN ISIDRO CITY OF MAKATI, FOURTH DISTRICT, NCR	FILIPINO	N	M	F	Y	TREASURER/CO O/DIRECTOR	A/E/M	186-612-840
4. MARC JASON JALANDONI 127 4TH ST. NEW MANILA, QUEZON CITY	FILIPINO	N	M	M	Y	VP-BUSINESS DEV'T/DIRECTO R	A/E/M	201-144-444
5. ARVIN A. MACEDA 26F TOWER B THE PEARL PLACE PEARL DRIVE, SAN ANTONIO, PASIG	FILIPINO	N	M	M	Y	CORPORATE SECRETARY/DIR ECTOR	A/E/M	474-762-419
6. GERARD SEAN NOEL H. RODRIGUEZ 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. MA. KARLA DENISE M. FRIAS 19 RAFAEL RECTO ST. CHV2 BF HOMES, PARANAQUE CITY	FILIPINO	N	M	F	N	VP- LEGAL/DIRECTO R		234-206-906
8. PAULINE GRACE CERDA 35D THE PEARL PLACE, PEARL DRIVE, BRGY SAN ANTONIO, ORTIGAS CENTER PASIG CITY	FILIPINO	N		F	N	COMPLIANCE OFFICER		324-959-058
9. MICHAEL L. LHUILLIER 8 PASEO, MA. LUISA PARK, BANILAD, CEBU	FILIPINO	N	C	M	Y	CHAIRMAN		120-163-306
10. MICHAEL JAMES M. LHUILLIER 8 PASEO, MA. LUISA PARK, BANILAD, CEBU	FILIPINO	N	M	M	Y	DIRECTOR		380-245-668
11. JOANNA M. LHUILLIER 8 PASEO, MA. LUISA PARK, BANILAD, CEBU	BRITISH	N	M	F	Y	DIRECTOR		996-712-495
12. MANOLETTE FEL E. DINSAY RAINBOW VILLAGE, KINASANG-AN PARDO. CEBU CITY	FILIPINO	N	I	M	Y	INDEPENDENT DIRECTOR		102-769-371
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 =====						
CORPORATE NAME: MEDICARE PLUS, INC.						
TOTAL NUMBER OF STOCKHOLDERS: 14				NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH: 7		
TOTAL ASSETS BASED ON LATEST AUDITED FINANCIAL STATEMENTS:				246,295,371.00		
STOCKHOLDER'S INFORMATION						
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP)	TAX IDENTIFICATION NUMBER
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP		
1 MARIA JESUSA VIRAY FILIPINO P1 RESIDENCIA8888, PEARL DRIVE, SAN ANTONIO, CITY OF PASIG, SECOND DISTRICT, NCR	COMMON	59,297,498	59,297,498	49.41%	59,297,498.00	112-185-579
	TOTAL	59,297,498	59,297,498.00			
2. ML CAPITAL INC. FILIPINO M. LHUILLIER BLDG., BENEDICTO ST., NORTH RECLAMATION AREA, CEBU CITY BENEFICIAL OWNER: MICHAEL L. LHUILLIER	COMMON	41,999,996	41,999,996.00	34.99%	41,999,996.00	604-689-741
	TOTAL	41,999,996	41,999,996.00			
3. JANE CHRISTINE SOCO FILIPINO 2430 MORSE SAN ISIDRO CITY OF MAKATI, FOURTH DISTRICT, NCR	COMMON	7,002,500	7,002,500	5.84%	7,002,500.00	186-612-840
	TOTAL	7,002,500	7,002,500.00			
4. MARC JASON JALANDONI FILIPINO 127 4TH ST. NEW MANILA, QUEZON CITY	COMMON	5,000,000	5,000,000.00	4.17%	5,000,000.00	201-144-444
	TOTAL	5,000,000	5,000,000.00			
5. 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	4.17%	4,999,999.00	600-407-010
	TOTAL	4,999,999	4,999,999.00			
6. DR. FRANCIS LUKE PIEDAD FILIPINO 19 ROAD 1 HIGHWAY HILLS SUBD. MANDALUYONG CITY	COMMON	1,200,000	1,200,000.00	1.00%	1,200,000.00	132-018-660
	TOTAL	1,200,000	1,200,000.00			
7. MARK JARDIEL YAMBOT FILIPINO 38 D WEST TOWER ONE SERENDRA 11TH AVE., BGC TAGUIG CITY	COMMON	500,000	500,000.00	0.42%	500,000.00	110-126-782
	TOTAL	500,000	500,000.00			
TOTAL AMOUNT OF SUBSCRIBED CAPITAL				100.00%	120,000,000.00	
TOTAL AMOUNT OF PAID-UP CAPITAL						

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 =====

CORPORATE NAME: MEDICARE PLUS, INC.						
TOTAL NUMBER OF STOCKHOLDERS: 14				NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH: 7		
TOTAL ASSETS BASED ON LATEST AUDITED FS:				246,295,371.00		
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. 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			
9. 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					
10. 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					
11. MICHAEL L. LHUILLIER FILIPINO 8 PASEO, MA. LUISA PARK, BANILAD, CEBU	COMMON	1	1.00	0.00%	1.00	120-163-306
	TOTAL	1	1.00			
12. MICHAEL JAMES M. LHUILLIER FILIPINO 8 PASEO, MA. LUISA PARK, BANILAD, CEBU	COMMON	1	1.00	0.00%	1.00	380-245-668
	TOTAL	1	1.00			
13. JOANNA M. LHUILLIER BRITISH 8 PASEO, MA. LUISA PARK, BANILAD, CEBU	COMMON	1	1.00	0.00%	1.00	996-712-495
	TOTAL	1	1.00			
14. MANOLETTE FEL E. DINSAY FILIPINO RAINBOW VILLAGE, KINASANG-AN PARDO, CEBU CITY	COMMON	1	1.00	0.00%	1.00	102-769-371
	TOTAL	1	1.00			
TOTAL AMOUNT OF SUBSCRIBED CAPITAL				100.00%	120,000,000.00	
TOTAL AMOUNT OF PAID-UP CAPITAL						
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 =====

CORPORATE NAME:		MEDICARE PLUS, INC.				
TOTAL NUMBER OF STOCKHOLDERS:		14		NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH:		7
TOTAL ASSETS BASED ON LATEST AUDITED FS:		246,295,371.00				
STOCKHOLDER'S INFORMATION						
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP)	TAX IDENTIFICATION NUMBER
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP		
15.						
*** PAGE INTENTIONALLY LEFT BLANK***						
16.						
	TOTAL					
17.						
	TOTAL					
18.						
	TOTAL					
19.						
	TOTAL					
20.						
	TOTAL					
21. OTHERS (Indicate the number of the remaining stockholders)						
	TOTAL					
TOTAL AMOUNT OF SUBSCRIBED CAPITAL				100.00%	120,000,000.00	
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=====			
CORPORATE NAME: <div>MEDICARE PLUS, INC.</div>			
1. INVESTMENT OF CORPORATE FUNDS IN ANOTHER CORPORATION	AMOUNT (PhP)	DATE OF BOARD RESOLUTION	
1.1 STOCKS	N/A	N/A	
1.2 BONDS/COMMERCIAL PAPER (Issued by Private Corporations)	N/A	N/A	
1.3 LOANS/ CREDITS/ ADVANCES	N/A	N/A	
1.4 GOVERNMENT TREASURY BILLS	13,048,000.00	July 08, 2025	
1.5 OTHERS	N/A	N/A	
2. INVESTMENT OF CORPORATE FUNDS IN ACTIVITIES UNDER ITS SECONDARY PURPOSES (PLEASE SPECIFY:)		DATE OF BOARD RESOLUTION	DATE OF STOCKHOLDERS RATIFICATION
N/A		N/A	N/A
3. TREASURY SHARES		NO. OF SHARES	% AS TO THE TOTAL NO. OF SHARES ISSUED
N/A		N/A	N/A
4. UNRESTRICTED/UNAPPROPRIATED RETAINED EARNINGS AS OF END OF LAST FISCAL YEAR:			
5. DIVIDENDS DECLARED DURING THE IMMEDIATELY PRECEDING YEAR: 0			
TYPE OF DIVIDEND	AMOUNT (PhP)	DATE DECLARED	
5.1 CASH	0.00	N/A	
5.2 STOCK	0.00	N/A	
5.3 PROPERTY	0.00	N/A	
TOTAL	0.00		
6. ADDITIONAL SHARES ISSUED DURING THE PERIOD: 70,000,000			
DATE	NO. OF SHARES		AMOUNT
Oct-29	70,000,000	COMMON	PHP 70,000,000.00
SECONDARY LICENSE/REGISTRATION WITH SEC AND OTHER GOV'T AGENCY:			
NAME OF AGENCY:	SEC	BSP	IC
TYPE OF LICENSE/REGN.	N/A	N/A	HMO-2023-21-R
DATE ISSUED:	N/A	N/A	**renewal of original issued secondary license with the IC**
DATE STARTED OPERATIONS:	N/A	N/A	**renewal of original issued secondary license with the IC**
TOTAL ANNUAL COMPENSATION OF DIRECTORS DURING THE PRECEDING FISCAL YEAR (in PhP)	TOTAL NO. OF OFFICERS	TOTAL NO. OF RANK & FILE EMPLOYEES	TOTAL MANPOWER COMPLEMENT
5,398,500.00	11	151	162

NOTE: USE ADDITIONAL SHEET IF NECESSARY

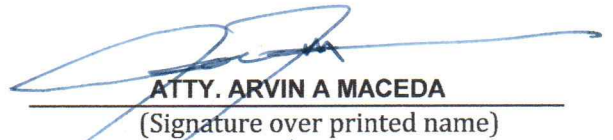
I, **ATTY. ARVIN MACEDA**, Corporate Secretary of **MEDICARE PLUS, INC.** declare under penalty of perjury that all matters set forth in this GIS have been made in good faith, duly verified by me and to the best of my knowledge and belief are true and correct.

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).

Done this 12 day of NOV 2025, 2025 in Pasig City.


ATTY. ARVIN A MACEDA
(Signature over printed name)

SUBSCRIBED AND SWORN TO before me in Pasig City on NOV 12 2025 by affiant who personally appeared before me and exhibited to me his/her competent evidence of identity consisting of _____ issued at _____ on _____.

NOTARY PUBLIC


ATTY. JOMAR M. HIZOLA
NOTARY PUBLIC
Cities of Pasig, San Juan, Pateros, Metro Manila
3803 38th Flr., Corporate Finance Plaza Bldg.
Ruby Rd. cor. Topaz Rd. Ortigas Center, Pasig City
Appointment No. 207; Until Dec. 31, 2026
SC Roll No. 81022; May 21, 2022
PTR No. 3042390; 01/14/2025 Pasig City
IBP No. 507325; 01/14/2025 IBP Manila I
MCLE No. VIII-0006903, Feb 20, 2024 - April 14, 2028

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Book No.: 9
Series of 2025

BENEFICIAL OWNERSHIP DECLARATION

FOR THE YEAR: 2025

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.
- Natural person(s) who exercise control over the reporting corporation, alone or together with others, through any
- B** 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/ % OF VOTING RIGHTS	TYPE OF BENEFICIAL OWNER ³ Direct (D) or Indirect (I)	CATEGORY OF BENEFICIAL OWNERSHIP
VIRAY, MARIA JESUSA BALUYUT	RESIDENCIA8888, P1 PEARL DRIVE, SAN ANTONIO, PASIG CITY	FILIPINO	12/17/1969	112-185-579	49.41%	D	A,C,D,E
LHUILIER, MICHAEL LLAMAS	8 PASEO, MA. LUISA PARK, BANILAD, CEBU	FILIPINO	03/08/1966	120-163-306	34.99%	I	A,C,D,E
SOCO, JANE CHRISTINE	2430 MORSE, SAN ISIDRO, CITY OF MAKATI, FOURTH DISTRICT	FILIPINO	07/25/1973	186-612-840	5.84%	D	C,D,E
JALANDONI, MARC JASON MONTINOLA	127 4TH ST. NEW MANILA, QUEZON CITY	FILIPINO	02/18/1979	201-144-444	4.17%	D	C,D,E

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

¹ For Stock Corporations.

² For Non-Stock Corporations.

³ For Stock Corporations.