



Corporate Records

Articles of Incorporation

General Information Sheet

GLF - SC2012

SECURITIES AND EXCHANGE COMMISSION
Green Lane Unit CRMD
FEB 25 2013
By: [Signature] Time: 4:20 PM

ARTICLES OF INCORPORATION

of

~~SPRING MEDICAL AND HEALTHCARE SERVICES INC.~~
(Name of Corporation)

KNOW ALL PERSONS BY THESE PRESENTS:

We, the undersigned incorporators, all of legal age, have this day voluntarily agreed to form a stock corporation under the laws of the Republic of the Philippines.

THAT WE HEREBY CERTIFY:

Article I: That the name of this corporation shall be

~~SPRING MEDICAL AND HEALTHCARE SERVICES INC.~~

Article II: That the purposes for which this corporation is formed are:

PRIMARY PURPOSE

To engage in the business of providing health services to be carried out by licensed professionals hired, employed or accredited by the corporation.

SECONDARY PURPOSES

1. To purchase, acquire, own, lease, sell and convey to the extent allowed by law, property of every kind and description as may be necessary or incidental to the conduct of its corporate business.
2. To raise capital or borrow money from not more than nineteen (19) lenders, including its stockholders, to meet the financial requirements of its business.
3. To invest in other companies and enter into joint venture agreements with any company, partnership, persons or government entities, domestic or foreign, for the advancement of its interest and in carry out its primary purpose;
4. To establish and operate branch offices or agencies to carry out any or all of its operations and business without any restriction as to place or amount;
5. To do and perform all acts and things necessary or incidental to the accomplishment of the foregoing purposes or the exercise of any or all the powers of a corporation for the benefit of this corporation and its stockholders.

Article III: That the corporation shall have its principal office at:

No./Street 68 Texas Ave.
 City/Town Quezon
 Province _____

Article IV: That the term for which said corporation is to exist is FIFTY (50) years from and after the date of issuance of the certificate of incorporation.

Article V: That the names, nationalities, and residences of the incorporators, majority of whom are residents of the Philippines, are as follows:

Name	Nationality	Residence (complete address)
<u>Sherry Lee</u>	<u>Filipino</u>	<u>8 Ste. Texas St., Quezon City</u>
<u>Marie Chan</u>	<u>Filipino</u>	<u>1520 Sanchez St., Tondo, Manila</u>
<u>Gerald Sy</u>	<u>Filipino</u>	<u>4th St., St. Ignatius Village, Quezon City</u>
<u>Larissa Blas</u>	<u>Filipino</u>	<u>7 E-S St., Kating, Quezon City</u>
<u>Belen Chiu</u>	<u>Filipino</u>	<u>1995 Juan Luna St., Tondo, Manila</u>

SECONDARY PURPOSES

1. To purchase, acquire, own, lease, sell and convey to the extent allowed by law, property of every kind and description as may be necessary or incidental to the conduct of its corporate business,
2. To raise capital or borrow money from not more than nineteen (19) lenders, including its stockholders, to meet the financial requirements of its business.
3. To invest in other companies and enter into joint venture agreements with any company, partnership, persons or government entities, domestic or foreign, for the advancement of its interest and in carry out its primary purpose;
4. To establish and operate branch offices or agencies to carry out any or all of its operations and business without any restriction as to place or amount;
5. To do and perform all acts and things necessary or incidental to the accomplishment of the foregoing purposes or the exercise of any or all the powers of a corporation for the benefit of this corporation and its stockholders.

Article III: That the corporation shall have its principal office at:

No./Street 68 Rizal Ave.
City/Town Quezon
Province _____

Article IV: That the term for which said corporation is to exist is FIFTY (50) years from and after the date of issuance of the certificate of incorporation.

Article V: That the names, nationalities, and residences of the incorporators, majority of whom are residents of the Philippines, are as follows:

Name	Nationality	Residence (complete address)
<u>Sherry Lee</u>	<u>Filipino</u>	<u>6 ste. Texas St., Quezon City</u>
<u>Marie Chan</u>	<u>Filipino</u>	<u>1320 Sanchez St., Tondo, Manila</u>
<u>Gerald Sy</u>	<u>Filipino</u>	<u>6th St., St. Ignatius Village, Quezon City</u>
<u>Larissa Blas</u>	<u>Filipino</u>	<u>7 E-G St., Kamias, Quezon City</u>
<u>Belen Chin</u>	<u>Filipino</u>	<u>1995 Juan Luna St., Tondo, Manila</u>

Article VI: That the number of directors of the corporation shall be five (5); and the names, nationalities and residences of the first directors of the corporation, majority of whom are residents of the Philippines, are as follows:

Name	Nationality	Residence (complete address)
Sherry Lee ✓	Filipino	8 Sto. Tomas, Quezon City
Marie Chan ✓	Filipino	1380 Sanchez St., Tondo, Manila
Gerald Sy ✓	Filipino	4th St., Sto. Ignatius Village, Quezon City
Mariona Diaz ✓	Filipino	7 E-C St., Kalinga, Quezon City
Dolan Chin ✓	Filipino	1995 J. Luna St., Tondo, Manila


Article IX: That no transfer of stock or interest which would reduce the stock ownership of Filipino citizens to less than the required percentage of the capital stock as provided by existing laws shall be allowed or permitted to be recorded in the proper books of the corporation and this restriction shall be indicated in the stock certificates issued by the corporation.

Article X: That Belen Chia has been elected by the subscribers as Treasurer of the corporation to act as such until his successor is duly elected and qualified in accordance with the by-laws; and that as such Treasurer, he has been authorized to receive for and in the name and for the benefit of the corporation, all subscriptions paid by the subscribers.

Article XI: That the incorporators and directors undertake to change the name of the corporation as herein provided, or as amended thereafter, immediately upon receipt of notice or directive from the Securities and Exchange Commission that another corporation, partnership or person has acquired a prior right to the use of that name or that the name has been declared as misleading, deceptive, confusingly similar to a registered name, or contrary to public morals, good custom or public policy.


FEB 09 2013

IN WITNESS WHEREOF, - we have set our hands this 20 day of CITY OF MANILA, Philippines.


TIN - 905-266-861

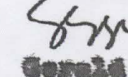
TIN -

TIN -


Marie Chan
TIN - 153-217-130

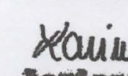
TIN -

TIN -


Gerold B?
TIN - 157-718-805

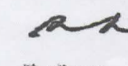
TIN -

TIN -


Mauna S.P. Man
Larissa Blas
TIN - 910-684-079

TIN -

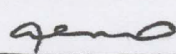
TIN -

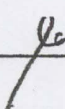

Belen Chia
TIN - 162-733-708

TIN -

TIN -

Signed in the presence of





ACKNOWLEDGMENT

REPUBLIC OF THE PHILIPPINES)

CITY OF MANILA)

SS

BEFORE ME, a Notary Public in and for CITY OF MANILA
Philippines, this February 08 2013 20 personally appeared:

Name	TIN / ID / Passport No.	Date & Place Issued
Sherry Lee	TIN 905-266-861	
Marie Chen	TIN 133-217-150	
Gerald Sy	TIN 157-718-805	
Luziana Blas	TIN 910-684-079	
Belen Chia	TIN 162-733-708	

all known to me and to me known to be the same persons who executed the foregoing Articles of Incorporation and they acknowledged to me that the same is their free and voluntary act and deed.

In witness whereof, I have hereunto set my hand and affixed my notarial seal on the date and at the place first above written.

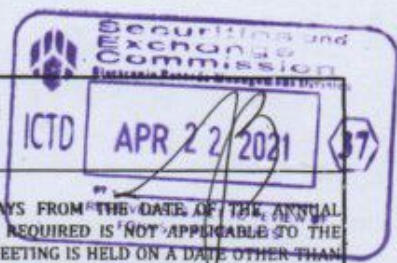
Doc. No. 151
Page No. 01
Book No. 0000
Series of 20 13

Notary Public
RODOLFO V. FUILLANTE
Notary Public
Until December 31, 2013
Rm. 327 Downtown Center Building
516 Quintin Paredes Street, Binondo, Manila
PTR No. 1407408 - Manila - 01/02/2013
IBP No. - 914305 - Pasig City - 1/03/2013
IBP Roll No. 3308 - TIN No. 42-50615571000
MCLE Compliance No. III-0012397 - 4/17/2010
Office Tel. No. 522-98-91/522-13-26

GENERAL INFORMATION SHEET (GIS)

FOR THE YEAR 2021

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: OPTIMUM MEDICAL AND HEALTHCARE SERVICES INC.		DATE REGISTERED: 2/26/2013	
BUSINESS/TRADE NAME: OPTIMUM MEDICAL AND HEALTHCARE SERVICES INC.		FISCAL YEAR END: December 31	
SEC REGISTRATION NUMBER: CS201304002		CORPORATE TAX IDENTIFICATION NUMBER (TIN) 008-480-351-000	
DATE OF ANNUAL MEETING PER BY-LAWS: March 31		WEBSITE/URL ADDRESS:	
ACTUAL DATE OF ANNUAL MEETING: MARCH 31, 2021		E-MAIL ADDRESS:	
COMPLETE PRINCIPAL OFFICE ADDRESS: 705-C ATLANTA CENTER #31 ANNAPOLIS ST., GREENHILLS, SAN JUAN, M.M.		FAX NUMBER: (02)8243-6754	
COMPLETE BUSINESS ADDRESS: 705-C ATLANTA CENTER #31 ANNAPOLIS ST., GREENHILLS, SAN JUAN, M.M.		OFFICIAL MOBILE NUMBER 0917-5714419	
OFFICIAL E-MAIL ADDRESS * jac.juan@yahoo.com	ALTERNATE E-MAIL ADDRESS megabusiness.sec@yahoo.com	ALTERNATE MOBILE NUMBER 0917-0610731	
NAME OF EXTERNAL AUDITOR & ITS SIGNING PARTNER: NELIA YULO PASCO		SEC ACCREDITATION NUMBER (if applicable):	TELEPHONE NUMBER(S): (02)8243-6754
PRIMARY PURPOSE/ACTIVITY/INDUSTRY PRESENTLY ENGAGED IN: PROVIDING HEALTH SERVICES		INDUSTRY CLASSIFICATION: 8512	GEOGRAPHICAL CODE:

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

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

NOTE: USE ADDITIONAL SHEET IF NECESSARY

Corporate Name:

OPTIMUM MEDICAL AND HEALTHCARE SERVICES 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:

<p>1.</p> <p><input type="checkbox"/> a. Banks</p> <p><input type="checkbox"/> b. Offshore Banking Units</p> <p><input type="checkbox"/> c. Quasi-Banks</p> <p><input type="checkbox"/> d. Trust Entities</p> <p><input type="checkbox"/> e. Non-Stock Savings and Loan Associations</p> <p><input type="checkbox"/> f. Pawnshops</p> <p><input type="checkbox"/> g. Foreign Exchange Dealers</p> <p><input type="checkbox"/> h. Money Changers</p> <p><input type="checkbox"/> i. Remittance Agents</p> <p><input type="checkbox"/> j. Electronic Money Issuers</p> <p><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.</p>	<p>4. <input type="checkbox"/> Jewelry dealers in precious metals, who, as a business, trade in precious metals</p>
<p>2.</p> <p><input type="checkbox"/> a. Insurance Companies</p> <p><input type="checkbox"/> b. Insurance Agents</p> <p><input type="checkbox"/> c. Insurance Brokers</p> <p><input type="checkbox"/> d. Professional Reinsurers</p> <p><input type="checkbox"/> e. Reinsurance Brokers</p> <p><input type="checkbox"/> f. Holding Companies</p> <p><input type="checkbox"/> g. Holding Company Systems</p> <p><input type="checkbox"/> h. Pre-need Companies</p> <p><input type="checkbox"/> i. Mutual Benefit Association</p> <p><input type="checkbox"/> j. All Other Persons and entities supervised and/or regulated by the Insurance Commission (IC)</p>	<p>5. <input type="checkbox"/> Jewelry dealers in precious stones, who, as a business, trade in precious stone</p>
<p>3.</p> <p><input type="checkbox"/> a. Securities Dealers</p> <p><input type="checkbox"/> b. Securities Brokers</p> <p><input type="checkbox"/> c. Securities Salesman</p> <p><input type="checkbox"/> d. Investment Houses</p> <p><input type="checkbox"/> e. Investment Agents and Consultants</p> <p><input type="checkbox"/> f. Trading Advisors</p> <p><input type="checkbox"/> g. Other entities managing Securities or rendering similar services</p> <p><input type="checkbox"/> h. Mutual Funds or Open-end Investment Companies</p> <p><input type="checkbox"/> i. Close-end Investment Companies</p> <p><input type="checkbox"/> j. Common Trust Funds or Issuers and other similar entities</p> <p><input type="checkbox"/> k. Transfer Companies and other similar entities</p> <p><input type="checkbox"/> l. Other entities administering or otherwise dealing in currency, commodities or financial derivatives based there on</p> <p><input type="checkbox"/> m. Entities administering or otherwise dealing in valuable objects</p> <p><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)</p>	<p>6. Company service providers which, as a business, provide any of the following services to third parties:</p> <p><input type="checkbox"/> acting as a formation agent of juridical persons</p> <p><input type="checkbox"/> 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</p> <p><input type="checkbox"/> providing a registered office, business address or accommodation, correspondence or administrative address for a company, a partnership or any other legal person or arrangement</p> <p><input type="checkbox"/> acting as (or arranging for another person to act as) a nominee shareholder for another person</p>
<p>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?</p>	<p>7. Persons who provide any of the following services:</p> <p><input type="checkbox"/> a. managing of client money, securities or other assets</p> <p><input type="checkbox"/> b. management of bank, savings or securities accounts</p> <p><input type="checkbox"/> c. organization of contributions for the creation, operation or management of companies</p> <p><input type="checkbox"/> d. creation, operation or management of juridical persons or arrangements, and buying and selling business entities</p> <p>8. <input type="checkbox"/> None of the above</p> <p>Describe nature of business: SERVICES</p> <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>

GENERAL INFORMATION SHEET
STOCK CORPORATION

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

CORPORATE NAME: OPTIMUM MEDICAL AND HEALTHCARE SERVICES 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	100,000	100	10,000,000.00
	-----	-----	-----	-----
	-----	-----	-----	-----
TOTAL		100,000	TOTAL P	10,000,000.00

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
	5	COMMON	100,000		100	10,000,000.00	100%
	-----	-----	-----	-----	-----	-----	-----
	-----	-----	-----	-----	-----	-----	-----
TOTAL		100,000	TOTAL	TOTAL P	10,000,000.00	100%	

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
-----	-----	-----	-----	-----	-----	-----	-----
-----	-----	-----	-----	-----	-----	-----	-----
Percentage of Foreign Equity :		TOTAL	TOTAL	TOTAL P	TOTAL SUBSCRIBED P	10,000,000.00	100%

PAID-UP CAPITAL

FILIPINO	NO. OF STOCK-HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STATED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
	5	COMMON	100,000	100	10,000,000.00	
	-----	-----	-----	-----	-----	-----
	-----	-----	-----	-----	-----	-----
TOTAL		100,000	TOTAL P	10,000,000.00	100%	

FOREIGN (INDICATE BY NATIONALITY)	NO. OF STOCK-HOLDERS	TYPE OF SHARES *	NUMBER OF SHARES	PAR/STATED VALUE	AMOUNT (PhP)	% OF OWNERSHIP
-----	-----	-----	-----	-----	-----	-----
-----	-----	-----	-----	-----	-----	-----
0.00 %		TOTAL	TOTAL P	TOTAL PAID-UP P	10,000,000.00	100%

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:		OPTIMUM MEDICAL AND HEALTHCARE SERVICES INC.						
DIRECTORS / OFFICERS								
NAME/CURRENT RESIDENTIAL ADDRESS	NATIONALITY	INC'R	BOARD	GENDER	STOCK HOLDER	OFFICER	EXEC. COMM.	TAX IDENTIFICATION NUMBER
1. GERALD SY 4TH St., St Ignatius Vill., Quezon City	FILIPINO	Y	C	M	Y	President	C/C	100-659-815-000
2. SHERRY LEE 8 Sto Tomas St., Quezon City	FILIPINO	Y	M	F	*Y		C/M	103-871-339-000
3. LARISSA BLAS 7K-G St., Kamias, Quezon City	FILIPINO	Y	M	F	Y	Secretary	C/M	144-136-317-000
4. BELEN CHIU 1995 Juan Luna St., Tondo, Manila	FILIPINO	Y	M	F	Y	Treasurer	C/M	103-876-657-000
5. MARIO CHAN 1320 Sanchez St., Tondo, Manila	FILIPINO	Y	M	M	Y		C/M	148-009-996-000
6.								
7.								
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 =====

CORPORATE NAME: **OPTIMUM MEDICAL AND HEALTHCARE SERVICES INC.**

TOTAL NUMBER OF STOCKHOLDERS: 5 **NO. OF STOCKHOLDERS WITH 100 OR MORE SHARE:**

TOTAL ASSETS BASED ON LATEST AUDITED FINANCIAL STATEMENTS:

STOCKHOLDER'S INFORMATION

NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	SHARES SUBSCRIBED				AMOUNT PAID (PhP)	TAX IDENTIFICATION NUMBER
	TYPE	NUMBER	AMOUNT (PhP)	% OF OWNERSHIP		
1. GERALD SY FILIPINO 4TH ST., ST. IGNATIUS VILL., QUEZON CITY	C	12,000	1,200,000.00	12.00%	1,200,000.00	100-659-815-000
	TOTAL	12,000	1,200,000.00			
2. SHERRY LEE FILIPINO 8 STO TOMAS ST., QUEZON CITY	C	3,000	300,000.00	3.00%	300,000.00	103-871-339-000
	TOTAL	3,000	300,000.00			
3. LARISAA BLAS FILIPINO 7K-G ST., KAMIAS, QUEZON CITY	C	20,000	2,000,000.00	20.00%	2,000,000.00	144-136-317-000
	TOTAL	20,000	2,000,000.00			
4. BELEN CHIU FILIPINO 1995 JUAN LUNA ST., TONDO, MANILA	C	60,000	6,000,000.00	60.00%	6,000,000.00	103-876-657-000
	TOTAL	60,000	6,000,000.00			
5. MARIO CHAN FILIPINO 1320 SANCHEZ ST., TONDO, MANILA	C	5,000	500,000.00	5.00%	500,000.00	148-009-996-000
	TOTAL	5,000	500,000.00			
6.						
	TOTAL					
7.						
	TOTAL					
TOTAL AMOUNT OF SUBSCRIBED CAPITAL			10,000,000.00	100.00%	10,000,000.00	
			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: OPTIMUM MEDICAL AND HEALTHCARE SERVICES INC

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	N/A	N/A
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
	NA	

4. UNRESTRICTED/UNAPPROPRIATED RETAINED EARNINGS AS OF END OF LAST FISCAL YEAR

5. DIVIDENDS DECLARED DURING THE IMMEDIATELY PRECEDING YEAR:

TYPE OF DIVIDEND	AMOUNT (PhP)	DATE DECLARED
5.1 CASH	N/A	N/A
5.2 STOCK	N/A	N/A
5.3 PROPERTY	N/A	N/A
TOTAL	P	

6. ADDITIONAL SHARES ISSUED DURING THE PERIOD:

DATE	NO. OF SHARES	AMOUNT
N/A	N/A	N/A
N/A	N/A	N/A
N/A	N/A	N/A
N/A	N/A	N/A

SECONDARY LICENSE/REGISTRATION WITH SEC AND OTHER GOV'T AGENCY:

NAME OF AGENCY:	SEC	BSP	IC
TYPE OF LICENSE/REGN.	N/A	N/A	N/A
DATE ISSUED:	N/A	N/A	N/A
DATE STARTED OPERATIONS:	N/A	N/A	N/A

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	5	5

NOTE: USE ADDITIONAL SHEET IF NECESSARY

BENEFICIAL OWNERSHIP DECLARATION

FOR THE YEAR: 2021

CS201304002

SEC REGISTRATION NUMBER:

CORPORATE NAME:

OPTIMUM MEDICAL AND HEALTHCARE SERVICES 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.
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 ¹ / % OF VOTING RIGHTS ²	TYPE OF BENEFICIAL OWNER ³ Direct (D) or Indirect (I)	CATEGORY OF BENEFICIAL OWNERSHIP
GERALD SY	4TH St. St. Ignatius Vill., Quezon City	FILIPINO		100-659-815	12%	D	President
LARISSA BLAS	7K-G St., Kamias, Quezon City	FILIPINO		144-136-317	20%	D	Secretary
BELEN CHIU	1995 Juan Luna St., Tondo, Manila	FILIPINO		103-876-657	60%	D	Treasurer

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

¹ For Stock Corporations.

² For Non-Stock Corporations.

³ For Stock Corporations.

I, LARISSA BLAS, Corporate Secretary of OPTIMUM MEDICAL AND HEALTHCARE SERVICES 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).

MANILA

Done this _____ day of _____, 20__ in _____.

LARISSA BLAS
(Signature over printed name)

20 APR 2021

SUBSCRIBED AND SWORN TO before me in _____ on _____ 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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SERIES OF 2021

ATTY. LEONARDO A. SARMIENTO III
Notary Public for the City of Manila
Notarial ~~NOTARY PUBLIC~~ No. 2020-049
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IBP No. 094680/11-12-19 (2020) Mla
MCLE No. VI-0022748 / 04-02-19