

# COVER SHEET

|   |   |   |   |   |  |  |  |  |  |
|---|---|---|---|---|--|--|--|--|--|
| 1 | 4 | 1 | 0 | 2 |  |  |  |  |  |
|---|---|---|---|---|--|--|--|--|--|

S.E.C. Registration Number

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| A | N | G | L | O | P | H | I | L | I | P | P | I | N | E | H | O | L | D | I | N | G | S |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

|   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|
| C | O | R | P | O | R | A | T | I | O | N |
|---|---|---|---|---|---|---|---|---|---|---|

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

(Company's Full Name)

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 6 | t | h | F | l | o | o | r | , | Q | u | a | d | A | l | p | h | a | C | e | n | t | r | u | m |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B | u | i | l | d | i | n | g | , | 1 | 2 | 5 | P | i | o | n | e | e | r | S | t | r | e | e | t |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | a | n | D | a | l | u | y | o | n | G | C | i | t | y |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

(Business Address : No. Street City / Town / Province)

|                       |
|-----------------------|
| Atty. Adrian S. Arias |
|-----------------------|

|                |
|----------------|
| +63(2) 6315139 |
|----------------|

Contact Person

Company Telephone Number

## SEC 23-B

### Statement of Changes in Ownership of Securities of ADRIAN PAULINO S. RAMOS

|   |   |   |   |
|---|---|---|---|
| 0 | 5 | 0 | 7 |
|---|---|---|---|

Month      Day

|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|--|--|--|--|--|--|

FORM TYPE

|  |
|--|
|  |
|--|

Secondary License  
Type, If Applicable

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

Month      Day

|   |   |   |
|---|---|---|
| S | E | C |
|---|---|---|

Dept. Requiring this Doc.

|  |
|--|
|  |
|--|

Amended Articles Number/Section

|   |   |   |   |
|---|---|---|---|
| 3 | 0 | 8 | 5 |
|---|---|---|---|

Total No. of Stockholders

Total Amount of Borrowings

|  |
|--|
|  |
|--|

Domestic

|  |
|--|
|  |
|--|

Foreign

To be accomplished by SEC Personnel concerned

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

File Number

---

LCU

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

Document I.D.

---

Cashier

STAMPS

Remarks = pls. use black ink for scanning purposes

---

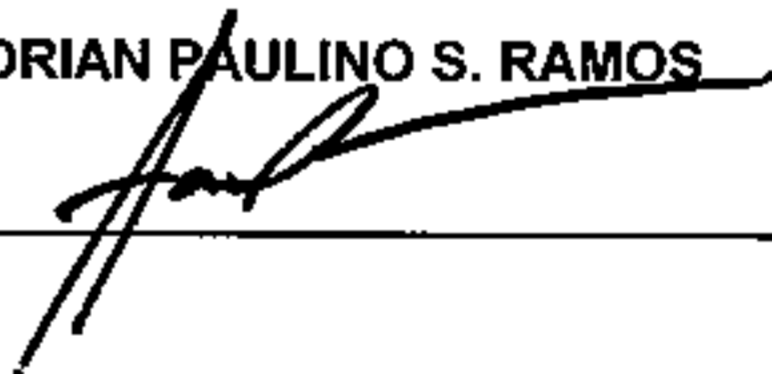


Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  
(e.g., warrants, options, convertible securities)

| 1. Derivative Security | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Yr) | 4. Number of Derivative Securities Acquired (A) or Disposed of (D) |            | 5. Date Exercisable and Expiration Date (Month/Day/Year) |                 | 6. Title and Amount of Underlying Securities |                            | 7. Price of Derivative Security | 8. No. of Derivative Securities Beneficially Owned at End of Month | 9. Ownership Form of Derivative Security, Direct (D) or indirect (I) * | 10. Nature of Indirect Beneficial Ownership |
|------------------------|--|------------------------------------|--|------------|--|-----------------|--|----------------------------|---------------------------------|--|--|---|
|                        |  |                                    | Amount   | (A) or (D) | Date Exercisable   | Expiration Date | Title  | Amount or Number of Shares |                                 |  |  |   |
| N/A                    | N/A  | N/A                                | N/A  | N/A        | N/A  | N/A             | N/A  | N/A                        | N/A                             | N/A  | N/A  | N/A   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |
|                        |  |                                    |  |            |  |                 |  |                            |                                 |  |  |   |

I hereby certify that the information set forth in this Report is true, complete and accurate, after reasonable inquiry and to the best of my knowledge and belief.

Explanation of Responses:

ADRIAN PAULINO S. RAMOS  


Note: File three (3) copies of this form, one of which must be manually signed.  
 Attach additional sheets if space provided is insufficient.

Date