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Receiving: Mark Jason Orcine

Receipt Date and Time: May 09, 2024 01:33:08 PM

Company Information

SEC Registration No.: CS201700608

Company Name: ARIANS INSURANCE BROKER, INC.

Industry Classification: J67030 Company Type: Stock Corporation

Document Information

Document ID: OST10509202482370470 **Document Type:** General Information Sheet

Document Code: GIS

Period Covered: May 02, 2024 Submission Type: Annual Meeting

Remarks: None

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

=======		=== PLEASE PRINT LEGIBLY		=======================================	==
CORPORATE NAME:	DATE REGISTERED:				
	1/9/2017				
BUSINESS/TRADE NAME:		FISCAL YEAR END:			
	ARIANS INSURA	NCE BROKER, INC.			
SEC REGISTRATION NUMBER:					
	CS201	700608			December 31
DATE OF ANNUAL MEETING PER BY-LA	AWS:				CORPORATE TAX IDENTIFICATION NUMBER (TIN)
	SECOND TUESDAY O	F MAY OF EACH YEAR			009-518-571-00
ACTUAL DATE OF ANNUAL MEETING:					WEBSITE/URL ADDRESS:
	MAY	2, 2024			www.arians.website
COMPLETE PRINCIPAL OFFICE ADDRE	SS:				E-MAIL ADDRESS:
Unit 1203, 12th Floor, Alveo Park Tria	angle Tower, 11th A	ve., cor. 32nd St., Brgy. I	ort Bonifa	acio, BGC, Taguig City	chona.m.jacinto@arians.ph
COMPLETE BUSINESS ADDRESS:					FAX NUMBER:
Unit 1203, 12th Floor, Alveo Park Tria	ngle Tower, 11th Av	e., cor. 32nd St., Brgy. F	ort Bonifa	acio, BGC, Taguig City	
OFFICIAL E-MAIL ADDRESS	ALTERNATE	E-MAIL ADDRESS	OFFICIAL MOBILE NUMBER		ALTERNATE MOBILE NUMBER
chona.m.jacinto@arians.ph	noel.b.tole	ete@arians.ph	09209612383		
NAME OF EXTERNAL AUDITOR & ITS S	IGNING PARTNER:		SEC ACCREI	DITATION NUMBER (if applicable)	TELEPHONE NUMBER(S):
R.R. TAN & ASSOCIATES, CPA		z F. SALVADOR			8816-3271/8816-3163
PRIMARY PURPOSE/ACTIVITY/INDUS	TRY PRESENTLY EN	IGAGED IN:	INDUSTR	Y CLASSIFICATION:	GEOGRAPHICAL CODE:
GEN. BUSINESS OF INSURANCE BROI			INS	SURANCE BROKERAGE	
=======================================	====== IN7	TERCOMPANY AFFILIAT	IONS ===	=======================================	=======================================
PARENT COMPANY		SEC REGISTRATIO		AI	DDRESS
N/A	N/A			N/A	
SUBSIDIARY/AFFILIATE SEC REGISTRA			N NO.	AI	DDRESS
N/A	N/A	N/A		N/A	
	NOT	TE: USE ADDITIONAL SHEET	IF NECESSA	ARY	

GENERAL INFORMATION	SHEET
STOCK CORPORATI	ION
======================================	IBLY =======
Corporate Name: ARIANS INSU	JRANCE BROKER., INC.
A. Is the Corporation a covered person under the Anti Mone	Y Y . A .
(AMLA), as amended? (Rep. Acts. 9160/9164/10167/103	
Please check the appropriate box:	
1.	
a. Banks	
b. Offshore Banking Units	Jewelry dealers in precious metals, who, as a
c. Quasi-Banks	business, trade in precious metals
d. Trust Entities	
e. Non-Stock Savings and Loan Associations	
f. Pawnshops	
g. Foreign Exchage Dealers	Jewelry dealers in precious stones, who, as a
h. Money Changers	business, trade in precious stone
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,	Company service providers which, as a business,
including their subsidiaries and affiliates.	6. 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
c. Insurance Brokers	b. acting as (or arranging for another person to act as)
d. Professional Reinsurers e. Reinsurance Brokers	a director or corporate secretary of a company, a partner of a partnership, or a similar position in
	relation to other juridical persons
f. Holding Companies g. Holding Company Systems	relation to earlier jarratean persons
h. Pre-need Companies	. c. providing a registered office, business address or
i. 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,	
a. Securities Dealers	d. acting as (or arranging for another person to act as)
b. Securities Brokers	a nominee shareholder for another person
c. Securities Salesman	Down and a second as a few
	7. 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	
f. Trading Advisors	b. management of bank, savings or securities accounts
g. Other entities managing Securities or rendering similar services	
h. Mutual Funds or Open-end Investment Companies	c. organization of contributions for the creation,
i. Close-end Investment Companies	operation or management of companies
j. Common Trust Funds or Issuers and other similar entities	d. creation, operation or management of juridical
k. Transfer Companies and other similar entities	persons or arrangements, and buying and selling
 1. Other entities administering or otherwise dealing in currency, 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 valuable objects n. Entities administering or otherwise dealing in cash Substitutes and	Describe
other similar monetary instruments or property supervised and/or	nature of
regulated by the Securities and Exchange Commission (SEC)	business:
B. Has the Corporation complied with the requirements on Custon	ner Due Diligence
(CDD) or Know Your Customer (KYC), record-keeping, and subr	
under the AMLA, as amended, since the last filing of its GIS?	

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STOCK CORPORATION

CORPORATE NAME: ARIANS INSURANCE BROKER, INC. CAPITAL STRUCTURE AUTHORIZED CAPITAL STOCK NUMBER OF AMOUNT (PhP) TYPE OF SHARES * PAR/STATED VALUE **SHARES** (No. of shares X Par/Stated Value) COMMON 500,000 50,000,000.00 ____100 TOTAL 500,000 TOTAL P 50,000,000.00 SUBSCRIBED CAPITAL NUMBER OF NO. OF NUMBER OF SHARES IN THE PAR/STATED FILIPINO % OF STOCK-TYPE OF SHARES * AMOUNT (PhP) **SHARES** HANDS OF THE VALUE **OWNERSHIP** HOLDERS PUBLIC ** ------TOTAL 200,000 TOTAL TOTAL P 20,000,000.00 NUMBER OF FOREIGN NO. OF NUMBER OF SHARES IN THE PAR/STATED (INDICATE BY TYPE OF SHARES * % OF STOCK-AMOUNT (PhP) **SHARES** HANDS OF THE VALUE **OWNERSHIP** NATIONALITY) HOLDERS PUBLIC ** Percentage of Foreign Equity: TOTAL TOTAL TOTAL P TOTAL SUBSCRIBED P PAID-UP CAPITAL NO. OF NUMBER OF % OF FILIPINO STOCK-TYPE OF SHARES * PAR/STATED VALUE AMOUNT (PhP) **SHARES** OWNERSHIP **HOLDERS** TOTAL 200,000 **TOTAL** 20,000,000.00 FOREIGN NO. OF NUMBER OF % OF (INDICATE BY STOCK-TYPE OF SHARES * PAR/STATED VALUE AMOUNT (PhP) **SHARES OWNERSHIP** NATIONALITY) **HOLDERS** TOTAL TOTAL P TOTAL PAID-UP P 20,000,000.00

NOTE: USE ADDITIONAL SHEET IF NECESSARY
* Common, Preferred or other classification
** Other than Directors, Officers, Shareholders owning 10% of outstanding shares.

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STOCK CORPORATION

CORPORATE NAME: ARIANS INSURANCE BROKER, INC.							
DIR	ЕСТОГ	RS / O	FFICEI	RS			
NATIONALITY	INC'R	BOARD	GENDER	STOCK HOLDER	OFFICER	EXEC. COMM.	TAX IDENTIFICATION NUMBER
FILIPINO	Y	С	F	Y	PRES/CEO		115-795-676
FILIPINO	Y	М	М	Y	ТСМН		100-891-713
FILIPINO	N	М	F	N	MKTG./HE AD		100-678-987
FILIPINO	Y	М	F	Y	DIRECTOR		110-129-131
FILIPINO	Y	М	М	Y	DIRECTOR		199-509-909
FILIPINO	N	М	М	Y	CORP. SEC		911-887-711
FILIPINO	N	М	М	Y	VP/TREAS		183-132-495
FILIPINO	Y	М	М	Y	DIRECTOR		104-147-573
FILIPINO	Y	М	F	Y	DIRECTOR		204-257-209
FILIPINO	N	I	М	N	DIRECTOR		220-986-120
	NATIONALITY FILIPINO FILIPINO FILIPINO FILIPINO FILIPINO FILIPINO FILIPINO FILIPINO FILIPINO	NATIONALITY INC'R FILIPINO Y FILIPINO N FILIPINO Y FILIPINO N FILIPINO N FILIPINO N FILIPINO Y FILIPINO Y FILIPINO Y	NATIONALITY INC'R BOARD FILIPINO Y C FILIPINO Y M FILIPINO Y M FILIPINO Y M FILIPINO N M FILIPINO N M FILIPINO N M FILIPINO N M FILIPINO Y M FILIPINO Y M	NATIONALITY INC'R BOARD GENDER FILIPINO Y C F FILIPINO Y M M FILIPINO N M F FILIPINO Y M M FILIPINO N M M FILIPINO Y M M FILIPINO Y M F FILIPINO Y M F	FILIPINO Y C F Y FILIPINO N M F N FILIPINO Y M M Y FILIPINO Y M M Y FILIPINO N M M Y FILIPINO Y M F Y	NATIONALITY INC'R BOARD GENDER STOCK HOLDER FILIPINO Y C F Y PRES/CEO FILIPINO Y M M Y TCMH FILIPINO N M F N MKTG./HE AD FILIPINO Y M M Y DIRECTOR FILIPINO N M M Y CORP. SEC FILIPINO N M M Y DIRECTOR FILIPINO N M M Y DIRECTOR FILIPINO N M M Y VP/TREAS FILIPINO Y M M Y DIRECTOR FILIPINO Y M F Y DIRECTOR FILIPINO N M M Y DIRECTOR FILIPINO Y M M Y DIRECTOR FILIPINO Y M M Y DIRECTOR	NATIONALITY INC'R BOARD GENDER STOCK HOLDER COMM. FILIPINO Y C F Y PRES/CEO FILIPINO N M F N MKTG./HE AD FILIPINO Y M M Y DIRECTOR FILIPINO N M M Y CORP. SEC FILIPINO N M M Y DIRECTOR FILIPINO Y M M Y DIRECTOR FILIPINO Y M M Y DIRECTOR FILIPINO Y M F Y DIRECTOR FILIPINO Y M F Y DIRECTOR

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.

STOCK CORPORATION

=======================================	=======	PLEASE PRINT	LEGIBLY	=======================================
CORPORATE NAME: ARIANS INSURANCE BROKER, INC.				
TOTAL NUMBER OF STOCKHOLDERS:	10		NO. OF STO	CKHOLDERS WITH 100 OR MORE SH 4
TOTAL ASSETS BASED ON LATEST AUDITED FIN	EMENTS:	57,226,419	0.00	

STOCKHOLDER'S INFORMATION

			SUBSCRIBED				
IONALITY AND CURRENT		SHAKES	SUBSCRIBED		AMOUNT	TAV IDENTIFICATION	
DENTIAL ADDRESS TY	PE N	UMBER	AMOUNT (PhP)	% OF OWNER- SHIP	PAID (PhP)	TAX IDENTIFICATION NUMBER	
CINTO		50,005	5,000,500.00				
				25.000/	5 000 500 00	445.505.656	
TC	OTAL	50,005	5,000,500.00	25.00%	5,000,500.00	115-795-676	
OLEDO		5	500.00				
				0.00%	500.00	415-388-273	
	OTAL	5	500.00				
UASON		5	500.00				
				0.00%	500.00	110-129-131	
Tro	OTA I	-	F00.00	0.0070	300.00	110-127-131	
	OTAL	5	500.00				
EZ		5	500.00				
				0.00%	500.00	100-891-713	
TC	OTAL	5	500.00				
DO L. BEREÑA		5	500.00				
				0.00%	500.00	104-147-573	
	DTAL	5	500.00				
N F. JIMENEZ		5	500.00				
				0.00%	500.00	199-509-909	
TC	TAI	5	500.00	0.0070	300.00	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	TAL						
11111		5	500.00				
-				0.00% 500.00		204-257-209	
ТОТ	TAL	5	500.00				
TOTAL AMOUNT OF SUBSO	CRIBED CAF			25.02%			
		5,003,500.00					
NTAN TOT	CRIBED CAF	PITAL	500.00 500.00 500.00 JNT OF PAID-UP CA	25.02%		000	

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.

GIS_STOCK (v.2020)

STOCK CORPORATION

CORPORATE NAME:	AKIIANS INS	URANCE BROK	EK, IIVC.				
TOTAL NUMBER OF STOCKHOLDERS: 10		NO. OF STOCKHOLDERS WITH 100 OR MORE SHARES EACH: 4					
COTAL ASSETS BASED ON LATEST AUDITED FS:	57,226,419.00)					
	S	TOCKHOLDER	'S INFORMATION				
		SHAR	ES SUBSCRIBED			TAX	
NAME, NATIONALITY AND CURRENT RESIDENTIAL ADDRESS	TYPE NUMBER		AMOUNT (PhP)	% OF OWNER- SHIP	AMOUNT PAID (PhP)	IDENTIFCATION NUMBER	
8. FLORENCIO V. ARINGO		35,000	3,500,000.00				
FILIPINO				17.50%	3,500,000.00	911-887-711	
	TOTAL	35,000	3,500,000.00		,		
9. ROMEO C. DIOLATA		79,965	7,996,500.00				
FILIPINO				39.98%	7,996,500.00	183-132-322	
	TOTAL	79,965	7,996,500.00				
10. WILFREDO G. VIRAY		35,000	3,500,000.00				
FILIPINO				17.50%	3,500,000.00	414-184-495	
	TOTAL	35,000	3,500,000.00	1			
11.							
				-			
	TOTAL						
12.							
				1			
	TOTAL						
13.							
				-			
	TOTAL			1			
14.							
				-			
	TOTAL			1			
TOTAL AMOUN	r of subscribe	D CAPITAL		74.98%	14,99	96,500.00	
		TOTA	AL AMOUNT OF PAID-U	JP CAPITAL	20,0	00,000.00	
N/ampi/ami/	M. CDECIEV THE	TOD 20 CTOCK	HOLDEDS AND INDICA	TF THE REST ΔS	SOTHERS		
INSTRUCTION INSTRUCTION IN INSTRUCTI	N: SPECIFY THE e indicate further	TOP 20 STOCK	HOLDERS AND INDICAT Thers owning more than 5	TE THE REST AS % of any class of	OTHERS the company's voting	securities. Attach	

GENERAL INFORMATION SHEET STOCK CORPORATION

CORPORATE NAME:	ARIANS	INSURANCE BROF	CER, INC.					
TOTAL NUMBER OF STOCKHOLDERS:	10		NO. OF STOCKHOLDERS WITH 10	0 OR MORE SHARES EAG	CH:	4		
TOTAL ASSETS BASED ON LATEST AUDITED FS:	57,226,43	19.00				4		
			SINFORMATION					
		STOCKHOLDER'S INFORMATION SHARES SUBSCRIBED						
NAME, NATIONALITY AND CURRENT				0/ 07	AMOUNT PAID	TAX IDENTIFICATION		
RESIDENTIAL ADDRESS	ТҮРЕ	NUMBER	AMOUNT (PhP)	% OF OWNER- SHIP	(PhP)	NUMBER		
15.								
				-				
	TOTAL			-				
16.								
	TOTAL			_				
	TOTAL							
17.								
	TOTAL			_				
	TOTAL							
18.								
	TOTAL							
	TOTAL							
19.								
	TOTAL			_				
	TOTAL							
20.								
	TOTAL			-				
	TOTAL							
21. OTHERS (Indicate the number of the remaining stockholders)								
				1				
	TOTAL							
TOTAL AMOUNT OF	SUBSCRIE	BED CAPITAL		0.00%				
		TOTAL AM	OUNT OF PAID-UP C		C	0.00		
INSTRUCTION: SPE	CIEV THE	TOP 20 STOCKHO	I DERS AND INDICAT	E THE DECT A	COTUEDO			

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.

STOCK CORPORATION

		E PLE	ASE PRINT LEGIBL	Y	========	=======	
CORPORATE NAME:	ARIANS INSURANCE BE	OKER, IN	C.		OPS bolk Webbonson Trible #3	VALUE AND THE SHIP OF	
1. INVESTMENT OF CO			AMOUNT (PhP	?)	DATE	OF BOARD RESOLUTION
FUNDS IN ANOTHER	CORPORATION						
1.1 STOCKS			N.A				
1.2 BONDS/COMME by Private Corp	ERCIAL PAPER (Issued orations)		N.A				
1.3 LOANS/ CREDIT			N.A				
1.4 GOVERNMENT	TREASURY BILLS		N.A				
1.5 OTHERS			N.A				
2. INVESTMENT OF COL	RPORATE FUNDS IN ACT	IVITIES II	NDFR ITS		DATE OF BO	ADD	DAMEOR
	SES (PLEASE SPECIFY:)				RESOLUTI		DATE OF STOCKHOLDERS RATIFICATION
	N.A						
3. TREASURY SHARES							
					NO. OF SHA	% AS TO THE TOTAL NO. OF SHARES ISSUED	
4. UNRESTRICTED/UNA	APPROPRIATED RETAIN	ED EARNI	NGS AS OF END	OF L	AST FISCAL YE	AR	
5. DIVIDENDS DECLARE	ED DURING THE IMMEDIA	ATELY PR	RECEDING YEAR:				
TYPE	E OF DIVIDEND		A	МО	UNT (PhP)		DATE DECLARED
5.1 CASH		N.A					
5.2 STOCK		N.A					
5.3 PROPERTY		N.A					
	,	TOTAL	P				
6. ADDITIONAL SHARES	S ISSUED DURING THE PI	ERIOD:					
DATE	NO. OF	SHARES				AMOU	NT
	N	.A					
		I.A					
	N	.A					
		l.A					
SECONDARY LICENSE/RI		AND OTH					
NAME OF AGENCY: TYPE OF	SEC		В	SSP			I C
LICENSE/REGN.							
DATE ISSUED:							
DATE STARTED OPERATIONS:							
TOTAL ANNUAL CO	HE PRECEDING FISCAL	TOTAL	TOTAL NO. OF OFFICERS 1		TOTAL NO. OF	NO. OF RANK & TOTAL MANPOW	
YEAR (i							
N	A		4		4		8

I, FLORENCIO V. ARINGO, Corporate Secretary of ARIANS INSURANCE BROKER, 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 6th day of May, 2024 in MAKATI CITY.

FLORENCIO V. ARINGO (Signature over printed name)

SUBSCRIBED AND SWORN TO before me in Mandaluyong City on May 6, 2024 by affiant who personally appeared before me and exhibited to me his/her competent evidence of identity consisting of TIN No. 911-887-711 and SSS No. 04-3251811-5

ATTY. JUAN JAIME D. NOLASCO

NOTARY PUBLIC

Until December 31, 2024 PTR No. 5426316 - 1/3/2024

Issued at Mandaluyong City IBP No. 386369 - 1/3/2024

Roll No. 60888

MCLE Compliance No. VII-0019594-04/13/202!

Unit 3FCSV Bldg., Maysilo Circle, Plainview, Mandaluyong City

DOC NO: 193; PAGE NO: 40; BOOK NO: 47; SERIES OF 2024

BENEFICIAL OWNERSHIP DECLARATION FOR THE YEAR: 2024

CS201700608

SEC REGISTRATION NUMBER: CORPORATE NAME:

ARIANS INSURANCE BROKER, 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:

<u>Category</u> <u>Description</u>

- 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.
- 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
			Mar. 26, 1954				
Jacinto, Chona M.	Pls. see last page	Filipino		115-795-676	25.02%	D	A,B,C
			Nov. 23, 1987				
Toledo, Anjelica I.	Pls. see last page	Filipino		415-388-273	0.00%	D	B,C
			Nov. 29, 1955				
Tuason, Eleonor J.	Pls. see last page	Filipino		110-129-131	0.00%	D	B,C

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

GIS_FOREIGN (v.2020)

¹ For Stock Corporations.

² For Non-Stock Corporations.

³ For Stock Corporations.

COMPLETE NAME (Surname, Give							
Name, Middle Name, Name Extension (i.e., Jr., Sr., III)	SPECIFIC RESIDENTIAL ADDRESS	NATIONA LITY	DATE OF BIRTH	TAX IDENTIFICATION NO.	% OF OWNERSHI P ¹ /% OF VOTING	TYPE OF BENEFICI AL OWNER ³	CATEGOR BENEFIC OWNER:
			May 5, 1960				
Gomez, Jesus D.	Pls. see last page	Filipino		100-891-713	0.00%	D	B,C
			Apr. 16, 1944				2,0
Bereña, Hermenegildo L.	Pls. see last page	Filipino		104-147-573	0.00%	D	B,C
			Aug. 21, 1970				2,0
Jimenez, Dennis Nylan F.	Pls. see last page	Filipino		199-509-909	0.00%	D	B,C
			Feb. 26, 1956				
Lantan, Noriza E.	Pls. see last page	Filipino		204-257-209	0.00%	D	B,C
			Oct. 27, 1975				2,0
Aringo, Florencio V.	Pls. see last page	Filipino		911-887-711	17.50%	D	B,C
			Dec. 17, 1964				
Diolata, Romeo C.	Pls. see last page	Filipino		183-132-322	39.98%	D	A,B,C

Name Address

Jacinto, Chona M.	19A, San Francisco St., Brgy. Kapitolyo, Pasig City
Toledo, Anjelica I.	U-201B, Landmark Vill. 2, Brgy. San Antonio, Valle Verde 2, Pasig City
Tuason, Eleanor J.	U-43, Chateau Verde Condo, Brgy. Ugong, Pasig City
Gomez, Jesus D.	15, San Mateo St., Brgy. Kapitolyo, Pasig City
Bereña, Hermenegildo L.	No. 6, Sanciano St., Brgy. Sto.Niño, Santol, Quezon City
Jimenez, Dennis Nylan F.	No. 26, R. Khan St., Brgy. BF Homes, Paranaque City
Lantan, Noriza E.	NO. 98C, C. Santos St., Brgy. BF Homes, Paranaque City
Aringo, Florencio V.	No. 8 UP Side, Bayanan, Brgy. Alabang, Muntinlupa City
Diolata, Romeo C.	L-29, Orchids St., Brgy. San Isidro, Cainta, Rizal
Viray G. Wilfredo	2633, Dagupan Ext., District II, Tondo, Manila