

COVER SHEET

P W - 0 2

SEC Registration Number

A. S O R I A N O C O R P O R A T I O N

(Company's Full Name)

7/ F P A C I F I C S T A R B U I L D I N G
G I L J. P U Y A T A V E N U E C O R. M A K A T I A V E.
M A K A T I C I T Y

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

ATTY. JOSHUA L. CASTRO

(Contact Person)

819-0251

(Company Telephone Number)

Every Third Wednesday of April

1 2 3 1

Month Day
(Fiscal Year)

2 3 - B

(Form Type)

0 4

Month Day
(Annual Meeting)

(Secondary License Type, If Applicable)

Dept. Requiring this Doc.

Amended Articles Number/Section

Total No. of Stockholders

Domestic

Foreign

To be accomplished by SEC Personnel concerned

File Number

LCU

Document ID

Cashier

STAMPS

Remarks: Please use BLACK ink for scanning purposes.

[illegible]

ATTY. JOSHUA L. CASTRO
VP & Asst. Corporate Secretary
 Signature of Reporting Person

April 2, 2019
Date

Explanation of Responses:

Intentional reinstatements or omissions of facts are a Criminal Violations under the SRC.

Note: File five (5) copies of this form, one of which must be manually signed by the reporting person. Otherwise, attach a copy of a Special Power of Attorney authorizing such other person to sign in behalf of the reporting person. Attach additional sheets if space provided is not sufficient.