

# COVER SHEET

**P W 0 0 0 0 1 1 5 A**

S.E.C. Registration Number

**A T L A S   C O N S O L I D A T E D   M I N I N G   A N D**

**D E V E L O P M E N T   C O R P O R A T I O N**

(Company's Full Name)

**9 T H   F L O O R   Q U A D   A L P H A   C E N T R U M**

**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**

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

**CARMEN ROSE A. BASALLO-  
ESTAMPADOR**

Contact Person

**(632) 584-9788**

Company Telephone Number

**1 2   3 1**

Month   Day  
Fiscal Year

**2 3 - B**

FORM TYPE

**Last Wednesday of April**

Month   Day  
Annual Meeting

**N/A**

Secondary LicenseType, If Applicable

Dept. Requiring this Doc.

Amended Articles Number/Section

Total No. of Stockholders

Total Amount of Borrowings

Domestic

Foreign

To be accomplished by SEC Personnel concerned

File Number

\_\_\_\_\_

LCU

Document I.D.

\_\_\_\_\_

Cashier

Remarks = pls. use black ink for scanning purposes



