COVER SHEET

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	S.E.C. Reg	gistration Number								
		P.S.E.	. Control Number							
V I V A N T C O R I	O R A T I	ON								
	(Company's Full N	Nama)								
9 0 7 - 9 0 8 A Y A L		E - F G U	C E N T	E R						
C E B U B U S I N E S		К,								
B G Y . L U Z , C E B	U C I T	Y								
(Business A	Address: No. Street C	City/Town Province)							
Atty. Joan A. Giduquio-Baron	(0	032) 232-0283, 234	-2256 and 234-228	5						
Contact Persons	Telephone Number of the Contact Person									
1 2 3 1	SEC FORM 23-A	L	0 6 0 0							
Month Day Fiscal Year	FORM TYPE		Month Day	V						
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C	I' To ICA	<u> </u>								
Second	ary license Type, If A	pplicable								
LDD			led Articles Number/Section							
Dept. Requiring this Doc.		Amended Ai	ued Articles Number/Section							
Total No. of Stockholders										
1 otal No. of Stockholders	Domestic	:	Foreign							
To be accomplished	ed by SEC Personnel co	ncerned								
File Number	LCU									
Document I.D.	Cashier									
STAMPS										

Remarks = Pls. Use black ink for scanning purposes

FORM 23-A

SECURITIES AND EXCHANGE COMMISSION Metro Manila, Philippines

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 23 of the Securities Regulation Code

				indirectly	respond on a separate line for each class of equity securities beneficially owned directly or indirectly	
					order Report on the second of	Remin
						T
m	n/a		0.00	c		
				0	Collilloll State	3
eneficial Ownership	5 Nature of Indirect Beneficial Ownership	3. Percentage 4. Ownership (%) Held Form: Direct (D) or Indirect (I)	3. Percentage (%) Held	Amount of Securities Beneficially Owned	Class of Equity Security	
	icially Owned	and I - Equity Securities Beneficially Owned	l apie I - Equi			
11/0			Toble 1 F			
				Filipino	(Province)	(City)
	1	AVP-Business Devt.		iship	Cebu City, Cebu 6000	Се
	(specify below)	(give title below)				
(Month/Day/Year)	10% Owner Other	Officer	×			
Date of Original				Tax Identification Number	ω	T a
7	to Issuer	Relationship of Reporting Person to Issuer (Check all applicable)	6. Relationshi	2-Oct-15	-GU Ce	90
	Vivant Corporation (WT	Vivant		(Month/Day/Year)		
	5	Issuer Name and Trading Symbol	5. Issuer Nam	Statement Reduling	Clark, Grant	Ci
				of Event Dogwinion	and Address of Reporting Person	7
						1

(Print or Type Responses)

(Over)

- (1) A person is directly or indirectly the beneficial owner of any equity security with respect to which he has or shares
 (A) Voting power which includes the power to vote, or to direct the voting of, such security, and/or
 (B) Investment power which includes the power to dispose of, or to direct the disposition of, such security
 (C) A person will be deemed to have an indirect beneficial interest in any equity security which is
 (A) held by members of a person's immediate family sharing the same household; held by members of a person's immediate family sharing the same household; held by a partnership in which such person is a general partner.
 (C) held by a corporation of which such person is a controlling shareholder, or theid by a corporation of which such person is a controlling shareholder, or their by a corporation of which such person is a controlling shareholder, or the such security

FORM 23-A (continued) Table II - Derivative Securities Beneficially Owned (e.g., warrants, options, convertible securities)

							n/a						
									isable	Date	(Month/Day/Year)	and Expiration Date	2. Date Exercisable
									Date	Expiration	Year)	on Date	
									Title			Underlying the Derivative Security	Title and Amount of Equity Securities
								Shares	Amount or				
									Security	Derivative	Price of		 Conversion
								mullect (I)	Direct (D) or	Security	Derivative	Form of	5. Ownership
											Concincial Ownership	Repeticial Ownership	6. Nature of Indirect

Explanation of Responses:

Grant Clark
Signature of Reporting Person

Intentional misstatements or omissions of facts is 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.

(Print or Type Responses)

Attach additional sheets if space provided is insufficient.

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