Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9372990

ITEM 1 - REPORT TYPE					
✓ New report					
☐ Amended report If an	nended, provide filing date	of report that is being am	ended	(YYYY-MM-DD)	
ITEM 2 - PARTY CERTIFYING T	HE REPORT				
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.					
Investment fund issuer	nunuous Disclosure and the comp	union policy to Nr 81-106.			
✓ Issuer (other than an inv	vestment fund)				
Underwriter	estillerit idrid)				
Onderwhiter					
ITEM 3 - ISSUER NAME AND (OTHER IDENTIFIERS				
Provide the following information abou	t the issuer, or if the issuer is an in	vestment fund, about the fund.			
Full legal nan	ne Bee Vectoring Technol	ogies International Inc.			
Previous full legal nan	us full legal name				
If the issuer's name changed in the last 12 months, provide most recent previous legal name.					
Websi	te www.beevt.com	(if applicab	le)		
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".					
Legal entity identifier 549300GS4F4Z0GFN4N56					
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.					
Full legal name(s) of co-issuer	(s)	(if applicab	le)		
ITEM 4 - UNDERWRITER INFO	RMATION				
If an underwriter is completing the repo	rt, provide the underwriter's full le	gal name and firm NRD number	:		
Full legal name					
Firm NRD number	(if applicable)				
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.					
Street address	;				
Municipality		Province/State			
Country		Postal code/Zip code			
Telephone number		Website		(if applicable)	

ITEM 5 - ISSUER INFORMATION						
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.						
a) Primary industry						
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.						
NAICS industry code 3 2 5 3 2 0						
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.						
Exploration Development Production						
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.						
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies						
☐ Cryptoassets						
b) Number of employees						
Number of employees: ✓ 0 - 49						
c) SEDAR profile number						
Does the issuer have a SEDAR profile?						
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 2 6 4 6						
If the issuer does not have SEDAR profile complete item 5(d) - (h).						
d) Head office address						
Street address Province/State						
Municipality Postal code/Zip code						
Country Telephone number						
e) Date of formation and financial year-end						
Date of formation Financial year-end						
YYYY MM DD MM DD						
f) Reporting issuer status						
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes						
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.						
AII AB BC MB NB NL NT						
NS NU ON PE QC SK YT						
g) Public listing status						
If the issuer has a CUSIP number, provide below (first 6 digits only)						
CUSIP number						
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.						
Exchange name						
h) Size of issuer's assets						
.,						

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION			
If the issuer is an inves	tment fund, provide the following information.			
a) Investment fund ma	anager information			
Full legal name				
Firm NRD number	(if applicable)			
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.			
Street address				
Municipality	Province/State			
Country	Postal code/Zip code			
Telephone number	Website (if applicable)			
b) Type of investment	fund			
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .			
Money market	☐ Equity ☐ Fixed income ☐ Balanced			
Alternative strateg	gies Cryptoasset Other (describe)			
Indicate whether one or bot	h of the following apply to the investment fund .			
Invests primarily in	n other investment fund issuers			
☐ Is a UCITs Fund¹				
¹ Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.				
c) Date of formation a	and financial year-end of the investment fund			
Date of forma	tion Financial year-end MM DD MM DD			
d) Reporting issuer st	atus of the investment fund			
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes			
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.			
☐ AII ☐	AB BC MB NB NL NT			
□ NS □	NU ON PE QC SK YT			
e) Public listing status	s of the investment fund			
If the investment fund has a	CUSIP number, provide below (first 6 digits only)			
	CUSIP number			
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.				
Exchange on an exchange and h				
-	AV) of the investment fund			
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).				
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M			
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD			

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

	•								
a)	Currency								
Sele	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.								
√	Canadian dollar U	6 dollar] Euro	Other (describe)				
b)	Distribution date(s)								
as b	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.								
	Start date	2021	02	04	End date	2021	02	04	
		YYYY	MM	DD		YYYY	MM	DD	•

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

_							Canadian \$	
	Securi code		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
	U B	s	076588	Units; each Unit is comprised of one (1) common share and one (1) common share purchase warrant. Each common share purchase warrant is exercisable for a period of twenty four (24) months from closing.	7,306,625.00	0.3200		2,338,120.00

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Convertible / exchangeable security code	Underlying security code	Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
		Lowest Highest				
W N T	C M S	0.5250				

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique ² purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	14	391,720.00
Alberta	NI 45-106 2.3 [Accredited investor]	2	104,000.00
Québec	NI 45-106 2.3 [Accredited investor]	1	96,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	28	946,200.00
Germany	NI 45-106 2.3 [Accredited investor]	1	48,000.00

	curities distributed	2,338,120.00	
United Kingdom	NI 45-106 2.3 [Accredited investor]	2	28,800.00
Panama	Other	1	48,000.00
Switzerland	Other	1	16,000.00
Switzerland	NI 45-106 2.3 [Accredited investor]	5	208,200.00
Taiwan, Province Of China	Other	1	51,200.00
Germany	Other	1	400,000.00

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides. If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

^{2b} In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated. Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No V Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION
No ✓ Yes If yes, indicate number of persons compensated.	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
	No ✓ Yes If yes, indicate number of persons compensated. 5

a) Name of person comp	ensated and regis	stration status								
Indicate whether the person cor	npensated is a regist	trant.	✓ No	Yes						
If the person compensated is an	individual, provide	the name of the indiv	idual.							
Full legal name of indiv	ridual									
		Family name	IFi	rst given name		Secondary given names				
If the person compensated is not an individual, provide the following information.										
Full legal name of non-individual HAG Global Consulting GmbH										
Firm NRD number (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes										
b) Business contact information										
If a firm NRD number is not pro	ovided in Item 8 (a), _i	provide the business (contact information	on of the person	being com	pensated.				
Street address	Am Griesberg 19									
Municipality	Pfarrkirchen			Provinc	ce/State					
Country	Germany		Ī	Postal code/Z	ip code	D-84347				
Email address	hochwimmer@ge	neralresearch.de	Ī	Telephone	number	498925004330				
c) Relationship to issuer	or investment fun	d manager								
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.										
Connect with the issu	-					er than an investment fund)				
Director or officer of the		•	nanager \Box		•	or investment fund manager				
—	no invocanione rana		Lanager	Zimploy oo oi t	.10 100001 0	Through tand manager				
d) Compensation details										
	commissions, securiti ch as clerical, printin	es-based compensati g, legal or accounting	on, gifts, discount g services. An issu	s or other comp er is not require	ensation. D d to ask for	ribution. Provide all amounts in To not report payments for services or details about, or report on, internal				
Cash commissions pa	id 57,9	74.00		Securit	y code 1	Security code 2 Security code 3				
Value of all securitie distributed as compensatio	-		Security codes	W	N T					
		 otions or other rights				mon shares for a period for				
Others are sent as and 'a	.5	Describe	two years at	a price of \$0.4	125 per W	/arrant				
Other compensation										
Total compensation pa	,	74.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.										

a) Name of person compe	ensated and regis	stration status									
Indicate whether the person com	pensated is a regist	rant.	☐ No	. [✓ Ye	s					
If the person compensated is an individual, provide the name of the individual.											
Full legal name of indivi	dual										
		Family name	I	First give	en name		I	Seco	ndary give	n name	es
If the person compensated is not an individual, provide the following information.											
Full legal name of	of non-individual	Leede Jones G	able Inc.								
Firm NRD number 5 7 7 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves											
b) Business contact information											
If a firm NRD number is not prov	rided in Item 8 (a), p	provide the business	contact inf	ormation of t	he perso	on bein	д сотре	nsated.			
Street address											
Municipality					Provi	nce/St	ate				
Country				Posta	al code	e/Zip co	ode				
Email address				Tel	lephon	e num	ber				
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.											
Connect with the issue			. ,	·				than an	investme	nt fun	d)
Director or officer of th	e investment fund o	or investment fund	manager	☐ Emp	oloyee o	of the is	suer or i	nvestme	ent fund m	nanag	er
✓ None of the above			J		,					Ü	
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash continuities incidental to the distribution, such allocation arrangements with the	mmissions, securition h as clerical, printing	es-based compenso g, legal or accounti	tion, gifts, d ng services.	iscounts or ot An issuer is n	ther con ot requi	npensat ired to d	tion. Do ask for de	not repo	rt paymer	its for	services
Cash commissions paid	d 9,29	96.00			Secu	urity cod	e1 S	ecurity co	ode 2 S	ecurity	code 3
Value of all securities distributed as compensation	1		Security of	codes	W	N	Т				
•	rms of warrants, op	otions or other right		Warrants t					s for a pe	eriod	for
Other compensation	5	Describ		ars at a pric	De OI ФC	J.425	Jei vvai	Tanı			
Total compensation paid	d 9,29	96.00									
Check box if the personal and the person		· · · · · · · · · · · · · · · · · · ·									
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	er. Indicate the secu ditional securities o	urity codes for all s									

a) Name of person compe	ensated and registr	ation status										
Indicate whether the person com	npensated is a registra	nt.	☐ No	✓ Yes								
If the person compensated is an	individual, provide the	e name of the indivi	dual.									
Full legal name of indivi	dual											
Family name First given name Secondary given names												
If the person compensated is not an individual, provide the following information.												
Full legal name	Full legal name of non-individual Hampton Securities Limited											
Firm NRD number 2 8 9 0 (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes												
b) Business contact information												
If a firm NRD number is not pro	vided in Item 8 (a), pro	ovide the business c	ontact information (of the person being co	ompensated.							
Street address												
Municipality				Province/State								
Country			Po	ostal code/Zip code								
Email address				Telephone number								
c) Relationship to issuer of	or investment fund	manager										
Indicate the person's relationship the Instructions and the meaning					eaning of "connected" in Part B(2) of n.							
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)												
Director or officer of th	e investment fund or	investment fund ma	anager 🔲 E	imployee of the issue	r or investment fund manager							
✓ None of the above												
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash co	ommissions, securities h as clerical, printing,	-based compensation legal or accounting	n, gifts, discounts o services. An issuer i	r other compensation is not required to ask	listribution. Provide all amounts in . Do not report payments for services for details about, or report on, internal							
Cash commissions pai	d 12,140	0.00		Security code 1	Security code 2 Security code 3							
Value of all securities distributed as compensation			Security codes	WNT								
·	erms of warrants, option	ons or other rights										
Other compensation	5	Describe		ts to purchase com orice of \$0.425 per	mon shares for a period for Warrant							
Total compensation pai	d 12,140	0.00										
Check box if the per	son will or may receiv	ve any deferred cor	npensation (describ	pe the terms below)								
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire and ⁵ Do not include deferred compe	er. Indicate the securi Iditional securities of t	ity codes for all sec			rights exercisable to acquire <u>uding</u> options, warrants or other							

a) Name of person compe	nsated and regis	tration s	status									
Indicate whether the person comp	pensated is a regist	rant.		☐ No		✓ Y	'es					
If the person compensated is an i	ndividual, provide t	he name	of the indivi	dual.								
Full legal name of individ	lual											
		Family nar	me		First giv	en nam	ne	-	Seco	ndary give	n name	s
If the person compensated is not an individual, provide the following information.												
Full legal name of	f non-individual	First Re	epublic Car	ital Corpo	ration							
Firm NRD number 2 7 2 7 0 (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes												
b) Business contact information												
If a firm NRD number is not provi	ided in Item 8 (a), p	rovide th	ne business co	ontact inforr	mation of	the per	rson beir	ng comp	oensated.			
Street address												
Municipality						Pro	vince/S	State				
Country					Post	tal cod	de/Zip d	code				
Email address					Te	elepho	ne nun	nber				
c) Relationship to issuer or	r investment fund	d manag	ger									
Indicate the person's relationship the Instructions and the meaning				-	-				ning of "co	nnected"	in Part	B(2) of
Connect with the issuer	or investment fun	d manag	jer		Insi	ider of	the issu	er (othe	er than an	investme	nt func	1)
Director or officer of the	e investment fund o	or investr	ment fund ma	anager	Em	ployee	of the is	ssuer o	r investme	ent fund n	nanage	er
✓ None of the above												
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the	mmissions, securition as clerical, printing	es-based g, legal o	compensation compensation	n, gifts, disc services. An	ounts or o	other co	ompenso uired to	ation. D ask for	o not repo	rt paymei	nts for s	services
Cash commissions paid	35,9	36.00				Se	curity co	de 1	Security co	ode 2 S	ecurity o	code 3
Value of all securities distributed as compensation ⁴	1		;	Security cod	les	W	N	Т				
·	ms of warrants, op	otions or	other rights									
Other compensation ⁵			Describe	112,300 two years	Warrants	s to pu	urchase	e comn	non shar	es for a	eriod	for
Total compensation paid	35,93	36.00		two your	o at a pri	00 01 0	ψο. 120	po. 11	arraire			
Check box if the pers	· · · · · · · · · · · · · · · · · · ·				•							
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compen	r. Indicate the secu litional securities o	ırity code	es for all sect									ner

a) Name of person comper	nsated and regist	ration status									
Indicate whether the person compensated is a registrant. No Yes											
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individ	ual										
	F	amily name	'	First give	n name		Seco	ondary given	names		
If the person compensated is not an individual, provide the following information.											
Full legal name of	non-individual	Canaccord Ger	uity Corp.								
Firm NRD number 9 0 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes											
b) Business contact information											
If a firm NRD number is not provi	ded in Item 8 (a), pr	ovide the busines	s contact info	rmation of th	ne person l	peing com	pensated.				
Street address											
Municipality					Province	e/State					
Country				Posta	ıl code/Zi	p code					
Email address				Tele	ephone r	umber					
c) Relationship to issuer or	investment fund	manager									
Indicate the person's relationship the Instructions and the meaning							ıning of "co	onnected" in	Part B(.	2) of	
Connect with the issuer			. , ,				er than an	investment	fund)		
Director or officer of the	investment fund or	r investment fund	manager	— Empl	loyee of th	e issuer	or investm	ent fund ma	nager		
✓ None of the above			-								
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash cor incidental to the distribution, such allocation arrangements with the d	nmissions, securities as clerical, printing	s-based compenso , legal or accounti	ntion, gifts, dis ng services. A	scounts or oth n issuer is no	her compe ot required	nsation. L to ask fo	Do not repo	ort payments	for serv	vices	
Cash commissions paid	18,95	0.40			Security	code 1	Security c	ode 2 Sec	urity cod	le 3	
Value of all securities distributed as compensation ⁴			Security co	odes	W	I T					
Describe teri	ms of warrants, opt	ions or other righ		Warrants to				s for a per	iod for		
Other compensation ⁵		Describ	<u> </u>		<u> </u>					\dashv	
Total compensation paid	18,95	0.40									
Check box if the person	on will or may recei	ive any deferred o	compensation	(describe th	ne terms b	elow)					
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire add. ⁵ Do not include deferred compen	r. Indicate the secui itional securities of	rity codes for all s	ation, <u>excludi</u> ecurities disti	i <u>ng</u> options, v ributed as co	warrants c ompensatio	or other rig on, <u>includ</u>	ghts exerci ling option	isable to acc	าuire วr other		

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER								
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.												
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).												
Reporting issuer in any jurisdiction of Canada												
Foreign public issuer												
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶												
Provide name of reporting issuer												
Wholly owned subsidiary of a foreign public issuer ⁶												
Provide name of foreign public issuer												
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_				
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.								
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.												
If the issuer is none of the above, check this box and complete Item 9(a) - (c).												
a) Directors, executive officer	s and promoters of	of the issuer										
Provide the following information for	•		moter of the issuer T	or locations within	Canada s	tate the	nrovince	or				
territory; otherwise state the country.							province					
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individe resident jurisdictio individe	ual or ail n of		onship to					
				Province or	country	D	0	Р				
b) Promoter information												
If the promoter listed above is not an within Canada, state the province or												
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual			to promo					
				Province or country	D		C)				
c) Residential address of eac	h individual											
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he				

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	See Vectoring Technologies International Inc.										
Full legal name	Malik	alik Ashish									
	Family name	First given name	•	Seconda	ıry given n	ames					
Title	President and CEO										
Telephone number	9163076879	Email address	amalik@b	peevt.cor	n						
Signature	Ashish Malik	2021	02	12							
		•	YYYY	MM	DD						

TEM 11- CONTACT PERSON											
Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.											
Same as individua	Same as individual certifying the report										
Full legal name	Kitani	Maki				Title	Corporate Advisor				
	Family name	First given	name	Secondary	given names						
Name of company	Partum Advisory Service	es Corp.									
Telephone number	6046872038		Em	ail address	mkitani@pa	rtumadvi	sory.com				

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.