Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

ITEM 1 – REPORT	T TYPE						
TIEM I - KEFOKI							
✓ New report							
Amended report	If amended, provide	Submission ID of report that is	being amended:	(Example: EDR123456789	90-123)		
	-						
ITEM 2 – PARTY (CERTIFYING TH	E REPORT					
			garding whether an issuer is an inve the companion policy to NI 81-106.	stment fund, refer to section 1.1 of			
		a communa biologaio ana	and demparison pelloy to 141 or 100.				
✓ Issuer (Other than an investment fund) ☐ Underwriter							
Oriderwriter							
ITEM 3 – ISSUER	NAME AND OT	HER IDENTIFIERS					
Provide the following in	nformation about the	issuer, or if the issuer is an in	nvestment fund, about the fund.				
Full legal name							
BioMark Diagnostics I	nc.						
Previous full legal name	e If the issuer's nam	e changed in the last 12 mon	ths, provide most recent previous l	egal name.			
Website (if applicable)							
www.biomarkdiagnosti	ics.com						
If the issuer has a lega	al entity identifier, pro	vide below. Refer to Part B of	f the Instructions for the definition o	f "legal entity identifier".			
Legal entity identifier							
Did tue or more so ico	ana diatributa a aina	le security? ✓ No ☐ Yes					
Did two or more co-iss		, <u> </u>					
	-	curity, provide the full legal n	ame(s) of the co-issuer(s) other the	n the issuer named above.			
Full legal name(s) of co	-issuer(s)						
ITEM 4 – UNDER	WRITER INFOR	MATION					
If an underwriter is con	mpleting the report of	ovide the underwriter's full led	gal name and firm NRD number.				
Full legal name	inprouring the report, pr	ovido uno undonumen o ram rog	gar namo ana mm rvi D nambor.				
Does the Underwriter's	Firm have an NRD N	lumber? Firm NRD n	umber				
☐ No ☐ Yes							
If the underwriter does	: not have a firm NRF	number provide the head of		rwriter			
Street address	INC.	Municipality	Province/State	Postal/ZIP code			
			1				
Country		Telephone number	Website (if applicable)				
- Juliu ,			Transition (in applicable)				

ITEM 5 – ISSUER INFORMATION		
a) Primary industry		
Provide the issuer's North American Industry corresponds to the issuer's primary business	v Classification Standard (NAICS) code (6 digits only) is activity.	that in your reasonable judgment most closely
NAICS industry code		
541714		
	ate the stage of operations. This does not apply to is best describes the issuer's stage of operations. on	suers that provide services to issuers operating in
	or substantially all of its assets in any of the following al/business debt Consumer debt Private comp	
b) Number of employees		
✓0 - 49 □50 - 99 □100 - 499 □500 or r	more	
c) SEDAR profile number		
	screensho	er's SEDAR profile is a "private" profile, please provide a of the issuer's profile by e-mail to arketfilings@osc.gov.on.ca
d) Head office address	If the issuer doe	s not have a SEDAR profile, complete Item 5(d) – (h).
Street address N	Municipality Province/State	Postal/ZIP code
Country	Telephone number	
e) Date of formation and financial year-e	end	
	Financial year-end	
Date of formation 1	mancial year-end	
f) Reporting issuer status		
Is the issuer a reporting issuer in any jurisdict. ☐ No ☐ Yes	tion of Canada?	
If yes, select the jurisdictions of Canada in wh		
AII AB BC MB		
NS NU ON PE	QC	
g) Public listing status		
Does the issuer have a CUSIP number? C ☐ No ☐ Yes	CUSIP number (provide first 6 digits only)	
If the issuer is publicly listed, provide the name exchange and not a trading facility such as, for	ne of the exchange on which the issuer's equity secu for example, an automated trading system.	rities primarily trade. Provide only the name of an
Exchange name: Not Applicable Toronto	o Stock Exchange	Canadian Securities Exchange
Aequitas Neo Exchange Austral	alian Securities Exchange Deutsche Boerse	Euronext
London Stock Exchange Nasdac	q New York Stock Exchai	nge Shanghai Stock Exchange
Shenzhen Stock Exchange Stock E	Exchange Of Hong Kong Tokyo Stock Exchange	OTHER
If other, describe:		
h) Size of issuer's assets		
Select the size of the issuer's assets based o	on its most recently available annual financial statem	nents (Canadian \$). If the issuer has not prepared annual
financial statements for its first financial year,	r, provide the size of the issuer's assets at the distrib o under \$25M \$25M to under \$100M	· · · · · · · · · · · · · · · · · · ·
\$100M to under \$500M\$500M	1 to under \$1B \$1B or over	

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	
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 US dollar Euro Other (describe):	
b) Distribution date(s)	Ī

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	End Date
2019-12-13	2019-12-13

c) Detailed purchaser information

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

BioMark_Sched1_Dec20.XLSX - 42 KB

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 \$	
Security code	CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount
UBS		2,231,157.0000	0.3000		669,347.1000
Description of security: A Unit consisting of one common share and one half share purchase warrant. Each whole warrant shall entitle the holder to at					

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.

Not Applicable

Convertible / exchangeable security code	•	Exercise (Canad	lian \$)	Expiry date (YYYY-MM-DD)	Conversion ratio
WNT	CMS	0.4500	Highest	2021-12-13	
Describe othe					

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 of Canada, state the province or territory, otherwise state country.

Province or country	Exemption relied on	No. of unique purchasers ^{2a}	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	6	85,500.0000
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	40,200.0000
British Columbia	NI 45-106 2.14 [Securities for debt]	2	60,000.0000
Manitoba	NI 45-106 2.5 [Family, friends and business associates]	1	200,000.1000
Alberta	NI 45-106 2.3 [Accredited investor]	4	42,000.0000
Ontario	NI 45-106 2.5 [Family, friends and business associates]	4	56,400.0000
China	NI 45-106 2.5 [Family, friends and business associates]	1	131,247.0000
United States	NI 45-106 2.5 [Family, friends and business associates]	1	6,600.0000

	, , , , , , , , , , , , , , , , , , , ,		
United States	NI 45-106 2.3 [Accredited investor]	4	47,400.0000
	Total dollar amou	nt of securities distributed	669,347.1000
	Total number of unique p	urchasers ^{2b} 25	

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

^{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.

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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.

√ Not Applicable

	Description	Date of document or other material	Previously filed with or delivered to regulator?	,	Filename
1.			\square Y \square N		

ITEM 8 - COMPENSATIO	N INFORMATIO	ON					
Provide information for each pers connection with the distribution.	•	•			• •		
Indicate whether any compensate ☐ No ☑ Yes	ion was paid, or will	be paid, in connection	n with the dis	tribution.			
PERSON 1							
a) Name of person compensa	ted and registratio	n status					
Indicate whether the person com ☐ No ☑ Yes	pensated is a regist	rant.					
If the person compensated is an individual, provide the full legal name of the individual. Family name First given name Secondary given names							
If the person compensated is not Full legal name of non-individual	an individual, provi	de the following inforn	nation.	Firm NRD number (if	· annlicable)		
Canaccord Genuity Corp.				900	арричанну		
Indicate whether the person com ✓ No ☐ Yes	pensated facilitated	the distribution throu	gh a funding	portal or an internet-ba	ased portal.		
b) Business contact information	on						
If a firm NRD number is not prov	ided in Item 8(a), pr	ovide the business co	ontact inform	ation of the person bei	ing compensated.		
Street address	Municipa	ality	Province/Sta	ite	Postal/ZIP code		
Country	Telephoi	ne number	Email addre	3S			
c) Relationship to issuer or in	vestment fund ma	nager					
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or i	the meaning of "cor	ntrol" in section 1.4 of	NI 45-106 fo		pleting this section).	
Insider of the issuer (other tha	n an investment fun	d)	✓ None	e of the above			
Director or officer of the invest	ment fund or investr	ment fund manager					
d) Compensation details							
Provide details of all compensati in Canadian dollars. Include cast for services incidental to the dist about, or report on, internal alloc	h commissions, sec tribution, such as cle	urities-based compen erical, printing, legal c	nsation, gifts, or accounting	discounts or other con services. An issuer is	mpensation. Do not not required to as	t report payments k for details	
Cash commissions paid	9,600.0000						_
Value of all securities distributed as	0.0000	Security code1 WN	T See	curity code2	Security code	3	_
compensation ⁴		Describe terms of wa					7
				Finder's Warrant is exe for a period of 2 years.			
Other compensation ⁵		Describe					=
Total compensation Paid	9,600.0000	<u>, </u>					=
Check box if the person will o	or may receive any o	deferred compensation	n (describe th	ie terms below)			

⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer.

 $^{5}\,\mathrm{Do}$ not include deferred compensation.

ITEM 9 – D	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF 1	THE ISSUER						
Indicate whet	her the issuer is any of the following (select the	one that applies - if more than on	e applies, select only one).						
Reporting	issuer in any jurisdiction of Canada								
Foreign p	ublic issuer								
•	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶ Provide name of reporting issuer								
Wholly ow	Wholly owned subsidiary of a foreign public issuer ⁶								
	ame of foreign public issuer								
	tributing only eligible foreign securities and the	•	•						
⁶ An issue securities ⁷ Check th	uer is at least one of the above, do not com r is a wholly owned subsidiary of a reporting is that are required by law to be owned by its dire his box if it applies to the current distribution eve efer to the definitions of "eligible foreign securit	suer or a foreign public issuer if all ectors, are beneficially owned by t ren if the issuer made previous dis	Il of the issuer's outstanding voting se the reporting issuer or the foreign pub stributions of other types of securities	olic issuer, respectively.					
☐ If the issu	uer is none of the above, check this box an	d complete Item 9(a) – (c).							
a) Directors	executive officers and promoters of the iss	suer							
	llowing information for each director, executive wise state the country. For "Relationship to iss			he province or					
Individual?	Organization or company name	Family name First given name Secondary given name	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)					
YN				□D □O □P					
b) Promoter	information								
	r listed above is not an individual, provide the f a, state the province or territory, otherwise state								
	Organization or company name	Family name First given name Secondary given name	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)					
				□ D □ O					
c) Residenti	al address of each individual								
	hedule 2 of this form providing the full resid completed report. Schedule 2 also requires								

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 exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter, 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

to the extent required, complete.						
Name of issuer/underwriter/agent BioMark Dia	agnostics Inc.					
Full legal name - Family name	First given nam	ne			Secondary given names	
Maula Bux	Rashid				Ahmed	
Title	-	Teleph	one number	Ema	ail address	
CEO	[604370	00779	rash	nid.biomark@gmail.com	
Signature Rashid Ahmed Maula Bux]	Date	2019-12-20			
ITEM 11 - CONTACT PERSON						
Provide the following business contact informati			,	-		

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 individual certifying th	e report				
Full legal name - Family name	First given name	Secondary given names	Title		
Name of company		Telephone number E	Email address		

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 Schedule 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.

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