# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9450921

ITEM 1 - REPORT TYPE								
✓ New report								
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)								
ITEM 2 - PARTY CERTIFYING THE REPORT	T Comments of the Comments of							
Indicate the party certifying the report (select only one). F Instrument 81-106 Investment Fund Continuous Disclosu	). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National							
☐ Investment fund issuer	stare and the companion policy to 141 01-100.							
✓ Issuer (other than an investment fund)	nd)							
Underwriter	,							
ITEM 3 - ISSUER NAME AND OTHER IDENT								
Provide the following information about the issuer, or if the	· · ·							
Full legal name Xebra Bra								
Previous full legal name 1198365 E	5 B.C. Ltd.							
If the issuer's name changed in the last 12 month	nths, provide most recent previous legal name.							
Website	(if applicable)							
If the issuer has a legal entity identifier_ provide below. Re	Refer to Part B of the Instructions for the definition of "legal entity identifier".							
Legal entity identifier								
If two or more issuers distributed a single security, provide	vide 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 applicable)							
ITEM 4 - UNDERWRITER INFORMATION								
If an underwriter is completing the report, provide the und	underwriter's full legal name and firm NRD number.							
Full legal name								
Firm NRD number (if applicable)								
If the underwriter does not have a firm NRD number, prov	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 5 5 1 1 1 3					
If the issuer is in the <b>mining industry</b> , 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 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐					
If the issuer does not have SEDAR profile complete item 5(d) - (h).					
d) Head office address					
Street address 1090 Hamilton Street Province/State British Columbia					
Municipality Vancouver Postal code/Zip code V6B 2R9					
Country Canada Telephone number 6046383474					
e) Date of formation and financial year-end					
Date of formation 2019 02 21 Financial year-end 02 28  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

TEM 6 - INVESTMENT FUND ISSUER INFORMATION								
If the issuer is an inves	tment fund, provide the following information.							
a) Investment fund manager 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								
<sup>1</sup> Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union 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 name								
-	f) Net asset value (NAV) 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	s5M to under \$25M s25M 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								
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)

0.....

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	04	12	End date	2021	04	12
	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 \$	
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
S U B		Each Subscription Receipt will entitle the holder to receive one common share and one-half of one common share purchase warrant	4,100,000.00	0.2000		820,000.00

#### 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	Т	С	М	S	0.3500		2022-04-12	1/1	The Company will be entitled to accelerate the Warrant Expiry Date should the closing price of the common shares, if listed, be at or greater than CDN\$0.50 per share for 10 consecutive trading days.

#### 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 <sup>2</sup> purchasers	Total amount (Canadian \$)
Mexico	NI 45-106 2.5 [Family, friends and business associates]	4	155,500.00
Germany	NI 45-106 2.3 [Accredited investor]	1	50,000.00

British Columbia	NI 45-106 2.3 [Accredited investor]	6	189,000.00			
Ontario	NI 45-106 2.5 [Family, friends and business associates]	1	2,500.00			
Ontario	NI 45-106 2.3 [Accredited investor]	5	348,000.00			
Alberta	NI 45-106 2.3 [Accredited investor]	1	50,000.00			
Québec	NI 45-106 2.3 [Accredited investor]	1	25,000.00			
	Total dollar amount of securities distributed					
	Total number of unique purchasers <sup>2b</sup>					

<sup>&</sup>lt;sup>2a</sup> 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	

<sup>&</sup>lt;sup>3</sup>"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)

<sup>&</sup>lt;sup>2b</sup> 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 8 - Compensatioi	N INFORMATION						
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 compens	ation was paid, or will be po	aid, in connecti	on with the distributior	1.			
No ✓ Yes If yes, indicate number of persons compensated.							
a) Name of person compo	ensated and registration	status					
Indicate whether the person con	npensated is a registrant.		✓ No	Yes			
If the person compensated is an individual, provide the name of the individual.							
Full legal name of individual Icaza Rodrigo							
Family name First given name Secondary given names							
If the person compensated is no	an individual, provide the	following infor	mation.				
Full legal name	of non-individual						
Fi	m NRD number			(if app	plicable)		
Indicate whether the person con	nnensated facilitated the dis	tribution throu	ah a fundina portal or	an internet-hased	portal. ✓ No Yes		
b) Business contact inform		eribation timoa	gri a fariating portation	an anternet basea	portui.		
If a firm NRD number is not pro		the husiness co	untact information of th	ne nerson heina co	mnensated		
	Cerro del Hombre 122,						
L		Soloma Rom					
Municipality [	Mexico City			Province/State	CDMX		
Country [	Country Mexico Postal code/Zip code 04310						
Email address			Tele	ephone number			
c) Relationship to issuer or investment fund manager							
Indicate the person's relationship the Instructions and the meaning					raning of "connected" in Part B(2) of		
Connect with the issue	er or investment fund mana	ager	Inside	er of the issuer (of	ther than an investment fund)		
Director or officer of the	e investment fund or inves	tment fund ma	ınager	loyee of the issuer	or investment fund manager		
✓ None of the above							
d) Compensation details							
Canadian dollars. Include cash co	ommissions, securities-base h as clerical, printing, legal	d compensatio or accounting	n, gifts, discounts or otl services. An issuer is no	her compensation. ot required to ask f	stribution. Provide all amounts in Do not report payments for services or details about, or report on, internal		
Cash commissions pai	d			Security code 1	Security code 2 Security code 3		
Value of all securities distributed as compensation	1 600 001	5	Security codes	C M S			
Describe to	erms of warrants, options of	r other rights					
Other compensation	5	Describe					
Total compensation pai	d 1,600.00						
Check box if the per	son will or may receive an				ights exercisable to acquire		
additional securities of the issurights exercisable to acquire ad  5 Do not include deferred compa	er. Indicate the security co Iditional securities of the is	des for all secu					

inciuae aererrea compensatio

a) Name of person comp	ensated and regist	ration status								
Indicate whether the person compensated is a registrant.    No Yes										
If the person compensated is an	individual, provide th	e name of the indiv	idual.							
Full legal name of indivi	dual Salcido		Lilian							
	Family name First given name Secondary given names						3			
If the person compensated is no	t an individual, provid	le the following info	rmation.							
Full legal name of non-individual										
Firm NRD number (if applicable)										
Indicate whether the person con	npensated facilitated	the distribution thro	ugh a funding po	rtal or a	n interne	et-based	portal.	$\checkmark$	No [	Yes
b) Business contact inform	mation									
If a firm NRD number is not pro	vided in Item 8 (a), pr	ovide the business c	ontact informatio	n of the	person l	being cor	mpensated.			
Street address	Calzada General M	lariano Escobedo	193, Col. Mari	ano Es	cobedo	)				
Municipality	Miguel Hidalgo			F	Province	e/State	CDMX			
Country	Mexico		]	Postal	code/Zi	p code				
Email address				Telep	hone r	number				
c) Relationship to issuer or investment fund manager										
Indicate the person's relationship the Instructions and the meanin								nnecte	d" in Part	B(2) of
Connect with the issue	-			-	-		her than an	investr	ment fund	.)
Director or officer of the	ne investment fund or	investment fund m	anager	Emplo	yee of th	ne issuer	or investme	ent fund	d manage	r
✓ None of the above										
d) Compensation details										
Provide details of all compensati	·	•								
Canadian dollars. Include cash of incidental to the distribution, suc	h as clerical, printing,	legal or accounting	services. An issue	er is not	required	l to ask fo				
allocation arrangements with the		employees of a non	-individual compe	ensated .	by the is	suer.				
Cash commissions pa	Security code 1 Security code 2 Security code 3						ode 3			
Value of all securitie distributed as compensation	10.84	0.00	Security codes		C	1 S				
Describe terms of warrants, options or other rights										
Other compensation	<b>1</b> <sup>5</sup>	Describe								
Total compensation pai	d 18,84	0.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)										
<sup>4</sup> Provide the aggregate value o	f all securities distrib	uted as compensati	ion. excludina oni	tions. w	arrants d	or other ri	iahts exercis	sable to	acquire	
additional securities of the issurights exercisable to acquire ac 5Do not include deferred compo	er. Indicate the secui Iditional securities of	rity codes for all sec								ner
Do not include deletted compe	nisauon.									

a) Name of person comp	pensated and registration status						
Indicate whether the person compensated is a registrant. No Ves							
If the person compensated is an individual, provide the name of the individual.							
Full legal name of indiv	vidual						
	Family name	First given name	Secondary given names				
If the person compensated is no	ot an individual, provide the following info	rmation.					
Full legal name of non-individual EMD Financial Inc.							
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 info	rmation						
If a firm NRD number is not pro	ovided in Item 8 (a), provide the business c	ontact information of the person being cor	mpensated.				
Street address	1910-1000 Rue Sherbrooke O						
Municipality	Montréal	Province/State	Québec				
Country	Canada	Postal code/Zip code	H3A 3G4				
Email address		Telephone number					
c) Relationship to issuer	or investment fund manager						
	nip with the issuer or investment fund maning of "control" in section 1.4 of NI 45-106						
	uer or investment fund manager	· · · <u> </u>	her than an investment fund)				
<u> </u>	-	_	,				
Director or officer of t	the investment fund or investment fund m	anager Employee of the issuer	or investment fund manager				
✓ None of the above							
d) Compensation details	3						
Canadian dollars. Include cash of incidental to the distribution, su	tion paid, or to be paid, to the person ident commissions, securities-based compensation In as clerical, printing, legal or accounting The directors, officers or employees of a non	on, gifts, discounts or other compensation. services. An issuer is not required to ask fo	Do not report payments for services				
Cash commissions pa	aid 17,840.00	Security code 1	Security code 2 Security code 3				
Value of all securities distributed as compensation		Security codes W N T					
Describe terms of warrants, options or other rights  Each Agent's Warrant will be exercisable at \$0.20. Agent's Warrants expire 24 months from date of issue.							
Other compensatio	on <sup>5</sup> Describe	Warrants expire 24 months norm de	ate of issue.				
Total compensation pa							
Check box if the person will or may receive any deferred compensation (describe the terms below)							
<sup>4</sup> Provide the aggregate value	of all securities distributed as compensati	on excluding options warrants or other r	ights exercisable to acquire				
additional securities of the issu	uer. Indicate the security codes for all sec additional securities of the issuer.	urities distributed as compensation, <u>inclu</u>	ding options, warrants or other				

a) Name of person comp	pensated and registration status						
Indicate whether the person cor	Indicate whether the person compensated is a registrant. No Ves						
If the person compensated is an individual, provide the name of the individual.							
Full legal name of indiv	<i>i</i> idual						
	Family name	First giver	n name	Secondary given names			
If the person compensated is no	ot an individual, provide the following	ı information.					
Full legal name of non-individual Canaccord Genuity Corp.							
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 infor	rmation						
If a firm NRD number is not pro	ovided in Item 8 (a), provide the busin	ness contact information of th	ne person being com	pensated.			
Street address	2200-609 Granville Street						
Municipality	Vancouver		Province/State	British Columbia			
Country	Canada	Posta	I code/Zip code	V7Y 1H2			
Email address		Tele	ephone number				
c) Relationship to issuer	or investment fund manager						
	ip with the issuer or investment fund in ng of "control" in section 1.4 of NI 45-			ning of "connected" in Part B(2) of			
	rer or investment fund manager		•	er than an investment fund)			
<u> </u>	-	_	,	,			
Director or officer of the	he investment fund or investment fur	nd manager Empl	loyee of the issuer of	or investment fund manager			
✓ None of the above							
d) Compensation details							
Canadian dollars. Include cash c incidental to the distribution, suc	tion paid, or to be paid, to the person i commissions, securities-based comper ich as clerical, printing, legal or accou ne directors, officers or employees of a	nsation, gifts, discounts or oth nting services. An issuer is no	her compensation. L ot required to ask fo	Do not report payments for services			
Cash commissions pa	aid 18,960.00		Security code 1	Security code 2 Security code 3			
Value of all securitie distributed as compensatio		Security codes	W N T				
Describe terms of warrants, options or other rights  Each Agent's Warrant will be exercisable at \$0.20. Agent's Warrants expire 24 months from date of issue.							
Other compensation	n <sup>5</sup> Desc	·	months from da	te of Issue.			
Total compensation pa							
Check box if the person will or may receive any deferred compensation (describe the terms below)							
45 44 %							
additional securities of the issu	of all securities distributed as comper uer. Indicate the security codes for all dditional securities of the issuer. mensation.						

#### ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER 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<sup>6</sup> Provide name of reporting issuer Wholly owned subsidiary of a foreign public issuer<sup>6</sup> Provide name of foreign public issuer Issuer distributing only eligible foreign securities and the distribution is to permitted clients only solution. If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10. <sup>6</sup>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. <sup>7</sup>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). Directors, executive officers and promoters of the issuer a) Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter. Business location of non-individual or Relationship to issuer residentail Secondary given (select all that apply) jurisdiction of Organization or company name Family name First given name names individual D 0 Ρ Province or country Chemonte Jordi Mexico / Giustra British Columbia Robert Grimaldo Antonio Mexico Gallardo Rodrigo Mexico British Columbia Martinez Jorge Yau Andrew British Columbia Freitas Daniela British Columbia Promoter information b) If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" - Director, "O" - Executive Officer. Residential Relationship to promoter jurisdiction of Secondary given (select one or both if applicable) individual Organization or company name Family name First given name names Province or D 0 country Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

# 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	Xebra Brands Ltd.						
Full legal name	Freitas Daniela						
	Family name	First given name	1	Seconda	ary given n	ames	
Title	Corporate Secretary						
Telephone number	6046383474	Email address	daniela@	columbu	sgroup.	com	
Signature	Daniela Freitas	Date	2021	04	21		
			YYYY	MM	DD		

ITEM 11- CONTACT F	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	al certifying the report						
Full legal name				Title			
•	Family name	First given name	Secondary given names		_		
Name of company							
Telephone number		Er	nail 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 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.