Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

Iтем 1 - Report Type								
 □ New report ☑ Amended report If amended, provide filing date of report that is being amended 2017 01 30 (YYYY-MM-DD) 								
TEM 2 - PARTY CERTIFYING THE 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								
✓ Issuer (other than an investment fund)								
☐ Underwriter								
Toronto November 10 and								
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS								
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.								
Full legal name Cuba Ventures Corp.								
Previous full legal name								
If the issuer's name changed in the last 12 months, provide most recent previous legal name.								
Website (if applicable)								
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								
Item 4 - Underwriter Information								
If an underwriter is completing the report, provide the underwriter's full legal name and firm National Registration Database (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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada's NAICS industry search tool . NAICS industry code 7 2 1 1 9 8
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 is to invest all or substantially all of its assets in any of the following? If yes, select all that apply. □ Mortgages □ Real estate □ Commerial/business debt □ Consumer debt □ Private companies
b) Number of employees
Number of employees:
c) SEDAR profile number
Does the issuer have a SEDAR profile? ☐ No ☑ Yes If yes, provide SEDAR profile number 0 0 0 5 6 5 8 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 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.
│
NS NU ON PE QC SK YT g) Public listing status
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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.
Exchange name(s):
h) Size of issuer's assets
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full 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 - INVESTMEN	T FUND ISSUER INFORMATION								
If the issuer is an invest	tment fund, provide the following information.								
a) Investment fund m	anager informaiton								
Full legal name									
Firm NRD number	(if applicable)								
If the investment fund ma	nager does not have a firm NRD number, provide the head office contact information of the investment fund manager.								
Street address									
	Description (Olotte								
Municipality	Province/State								
Country	Postal code/Zip code								
Telephone number	Website (if applicable)								
b) Type of investmen	t fund								
Type of investment fund the	nt most accurately identifies the issuer (select only one) .								
Money market	☐ Equity ☐ Fixed income								
Balanced	Alternative strategies 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									
	ive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) ve investment schemes to operate throughout the EU on a passport basis on authorization from one member state.								
	and financial year-end of the investment fund								
Date of forma									
Date of forma	YYYY MM DD MM DD								
d) Reporting issuer st	tatus of the investment fund								
Is the investment fund a rep	porting issuer in any jurisdication of Canada? No Yes								
	of Canada in which the investment fund is a reporting issuer.								
☐ All ☐	AB BC MB NB NL NT								
e) Public listing status	NU ON PE QC SK YT s of the investment fund								
ij the trivestment juna nas t	a CUSIP number, provide below (first 6 digits only) CUSIP number								
If the investment fund is nu	blicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for								
	I for and received a listing, which excludes, for example, automated trading systems.								
Exchage name	ss								
f) Net asset value (NA	AV) of the investment fund								
	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								
3100M to under \$500	0M S500M to under \$1B S1B 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, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report. 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) Distribution date(s) 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 2016 2016 11 16 11 16 MM DD MM DD YYYYDetailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. Types of securities distributed Provide the following information for all distributions that take place in a jurisdiction of Canada on a per security basis. Refer to Part A 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 \$

				Cariacian ¢		
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS	624733000	Units consisting of one common shares and on share purchase warrant.	9,810,000.00	0.0500	0.0500	490,500.00

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.

Security code	Underlying security code			Underlying security code Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
				Lowest	Highest			
UNT	СІ	М	S	0.0750	0.0750	2016-11-17	1.00	

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 purchasers	Total amount (Canadian \$)
Ontario	NI 45-106 2.3 [Accredited investor]	1	5,000.00
Alberta	NI 45-106 2.3 [Accredited investor]	5	42,500.00
Yukon	NI 45-106 2.3 [Accredited investor]	32,400.00	
Australia	NI 45-106 2.3 [Accredited investor]	1	5,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	21	353,800.00
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	8	52,500.00
	urities distributed	491,200.00	
	Total number of unique purchasers ²	43	

²In 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.

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)

TEM 8 - COMPENSATION INFORMATION		-4:
with the distribution. Complete additional copies of this pag	whom the issuer directly provides, or will provide, any compensation in conne of if more than one person was, or will be, compensated.	ection
Indicate whether any compensation was paid, or will be paid, in		
No Yes If yes, indicate number	of persons compensated. 3	
a) Name of person compensated and registration stat	ıs	
Indicate whether the person compensated is a registrant.	☐ No ✓ Yes	
If the person compensated is an individual, provide the name o	the individual.	
Full legal name of individual		
Family name	First given name Secondary given names	
If the person compensated is not an individual, provide the fol	-	
Full legal name of non-individual Canaccord	Genuity Corp.	
Firm NRD number 9 0	0 (if applicable)	
Indicate whether the person compensated facilitated the distri	oution through a funding portal or an internet-based portal. No	Yes
b) Business contact information		
If a firm NRD number is not provided in Item 8 (a), provide the	pusiness contact information of the person being compensated.	
Street address 609 Granville Street		
Municipality Vancouver	Province/State British Columbia	
Country Canada	Postal code/Zip code V6C 2X8	
Email address	Telephone number	
c) Relationship to issuer or investment fund manager		
Indicate the person's relationship with the issuer or investment B(2) of the Instructions and the meaning of "control" in section	und manager (select all that apply). Refer to the meaning of "connected" in P 1.4 of NI 45-106 for the purposes of completing this section.	art
Connect with the issuer or investment fund manager	Insider of the issuer (other than an investment fun	d)
Director or officer of the investment fund or investment	fund manager Employee of the issuer or investment fund manag	er
✓ None of the above	_	
d) Compensation details		
Canadian dollars. Include cash commissions, securities-based co	rson identified in Item 8(a) in connection with the distribution. Provide all ammensation, gifts, discounts or other compensation. Do not report payments fingal or accounting services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer.	or
on, internal allocation arrangements with the directors, officers Cash commissions paid 12,880.00	Security codes Security code 1 Security code 2 Security	code 3
Cash commissions paid Value of all securities distributed as		code 3
Cash commissions paid Value of all securities distributed as compensation ⁴	Security code 1 Security code 2 Security W N T	code 3
Cash commissions paid Value of all securities distributed as compensation ⁴ Describe terms of warrants, options or other	Security code 1 Security code 2 Security W N T Security code 2 Security rights 2 year warrants exercisable at 0.075.	code 3
Cash commissions paid Value of all securities distributed as compensation ⁴ Describe terms of warrants, options or othe Other compensation ⁵ Describe terms of warrants, options or othe	Security code 1 Security code 2 Security W N T	code 3
Cash commissions paid Value of all securities distributed as compensation ⁴ Describe terms of warrants, options or other	Security code 1 Security code 2 Security W N T Security code 2 Security rights 2 year warrants exercisable at 0.075.	code 3
Cash commissions paid Value of all securities distributed as compensation ⁴ Describe terms of warrants, options or othe Other compensation ⁵ Describe terms of warrants, options or othe	Security code 1 Security code 2 Security W N T rights 2 year warrants exercisable at 0.075.	code 3
Cash commissions paid Value of all securities distributed as compensation Describe terms of warrants, options or other compensation Total compensation paid 12,880.00	Security code 1 Security code 2 Security W N T rights 2 year warrants exercisable at 0.075.	code 3

a) Name of person compensa	ated and registration status								
Indicate whether the person compensated is a registrant. No Ves									
If the person compensated is an inc	dividual, provide the name of the indi	vidual.							
Full legal name of individual	ıl								
	Family name	First given name	e Secon	ndary given names					
If the person compensated is not o	an individual, provide the following in	formation.							
Full legal name of no	on-individual Leede Jones Gabl	e							
Firm N	Firm NRD number 5 7 7 0 (if applicable)								
Indicate whether the person comp	pensated facilitated the distribution th	rough a funding portal	or an internet-base	d portal. ✓ No ☐ Yes					
b) Business contact informati	ion								
If a firm NRD number is not provid	ded in Item 8 (a), provide the business	contact information of	the person being co	mpensated.					
Street address 1140	West Pender Street								
Municipality Vand	couver		Province/State	British Columbia					
Country	ada	Postal	code/Zip code	V6E4G1					
Email address		Tele	ephone number						
c) Relationship to issuer or in	vestment fund manager								
The state of the s	with the issuer or investment fund mar caning of "control" in section 1.4 of NI		•	_					
Connect with the issuer or	-		•	er than an investment fund)					
Director or officer of the inv	vestment fund or investment fund ma	ınager	oyee of the issuer o	or investment fund manager					
✓ None of the above				•					
d) Compensation details									
Canadian dollars. Include cash com services incidental to the distributio	paid, or to be paid, to the person iden nmissions, securities-based compensat on, such as clerical, printing, legal or a ots with the directors, officers or emplo	ion, gifts, discounts or o ccounting services. An is	other compensation. Essuer is not required	Do not report payments for I to ask for details about, or report					
Cash commissions paid	5,950.00	Security codes	Security code 1	Security code 2 Security code 3					
Value of all securities distributed as compensation⁴		,	W N T						
Describe terms	of warrants, options or other rights	2 year term exercis	able at \$0.075						
Other compensation ⁵	Describe								
Total compensation paid	5,950.00								
Check box if the person	will or may receive any deferred com	pensation (describe th	e terms below)						

a) Name of person com	pensated and registration status		a) Name of person compensated and registration status							
Indicate whether the perso	Indicate whether the person compensated is a registrant. No Yes									
If the person compensated is	s an individual, provide the name of the ind	lividual.								
Full legal name of indi	ividual									
	Family name	First given name	e Seco	ndary given names						
If the person compensated	is not an individual, provide the following i	nformation.								
Full legal name	e of non-individual Haywood Securiti	ies Inc.								
F	Firm NRD number 1 6 3	0	(if appl	icable)						
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves										
b) Business contact info	ormation									
If a firm NRD number is not	provided in Item 8 (a), provide the business	s contact information of	the person being co	ompensated.						
Street address	200 Burrard Street									
Municipality	Vancouver]	Province/State	British Colum	bia					
Country	Canada	Postal	l code/Zip code	V6E 4G1						
Email address		Tele	ephone number							
c) Relationship to issue	r or investment fund manager									
•	nship with the issuer or investment fund mo the meaning of "control" in section 1.4 of N			•	ted" in Part					
	uer or investment fund manager		er of the issuer (oth		ment fund)					
Director or officer of	the investment fund or investment fund m	anager	oyee of the issuer	or investment fun	d manager					
None of the above		_								
d) Compensation details	S									
Canadian dollars. Include cas services incidental to the dist	nsation paid, or to be paid, to the person ide sh commissions, securities-based compenso tribution, such as clerical, printing, legal or gements with the directors, officers or emplo	ntion, gifts, discounts or c accounting services. An i	other compensation issuer is not require	. Do not report pa d to ask for detail:	yments for					
Cash commissions p	paid 350.00	Security codes	Security code 1	Security code 2	Security code 3					
Value of all securiti	ies	coounty codes	WNT							
distributed compensation	I I									
Describe	terms of warrants, options or other rights									
Other compensation	on ⁵ Describe	2 years exercisable	e at 0.075							
Total compensation pa	aid 350.00									
Check box if the pe	erson will or may receive any deferred cor	mpensation (describe th	ne terms below)							
additional securities of the it	ue of all securities distributed as compensa issuer. Indicate the security codes for all s re additional securities of the issuer. Impensation.									

ГЕМ	9 - Directors, Executi	VE OFFICERS A	AND PROMO	TERS OF THE IS	SSUER					
If t	he issuer is an investment fund, o	do not complete I	tem 9. Procced to	o Item 10.						
Indicate whether the issuer is any of the following (select all that apply).										
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 for	eign public issuer								
	Issuer distributing eligible forei	gn securities only	to permitted clien	ts ⁷						
If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10. 6An 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 Checck 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. 1 If the issuer is none of the above, check this box and complete Item 9(a) - (c).									ctively.	
a)	Directors, executive officers a	and promoters of	f the issuer							
	ovide the following information for rritory; otherwise state the country.						da, stat	te the p	province (or
	Organization or company name	Family name	First given name	Secondary give names	Business lo non-individ resider jurisdicti individ	dual or ntail ion of	(sel	itionshi issuer ect all apply)	that	
					Province o	r country	D	0	Р	
b)	Promoter information									
	the promoter listed above is not an ithin Canada, state the province or t									
	Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relatio (select one	nship to	o prom h if app	oter olicable)	
					Province or country	D		C)	
c)	Residential address of each i	ndividual								

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 or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	Pavle	Lori	Lori		
	Family name	First given name	_	Secondary given names	
Title	Corporate Secretary				
Name of issuer/underwriter/ investment fund manager	Cuba Ventures Corp.				
Telephone number	6046873376	Email address	lpavle@ninetyeight.com		
Signature	Lori Pavle	Date	2017	02	01
		_	YYYY	MM	DD

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 the report Full legal name Family name First given name Secondary given names Name of company Telephone number 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:

- 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.