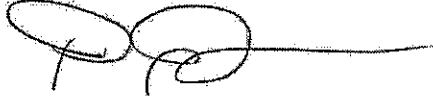


This is Exhibit "C" referred to
in the Affidavit of **AL HILDEBRANDT**
sworn before me this 29th day of
August, 2011

A handwritten signature in black ink, consisting of a large, stylized initial 'P' followed by a cursive name and a long horizontal line extending to the right.

A Commissioner for taking affidavits, etc.



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Business Debtor Enquiry

Web Page ID: **WNoMatch001**

File Currency: **28AUG 2011**

System Date: **29AUG2011**

Search Criteria: REGENT HEALTHCARE SYSTEMS

No Match.

No registered financing statement or registered claim for lien was found for this enquiry.

New Enquiry

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[LAST MODIFIED: APRIL 10, 2011](#)



Main Menu > New Enquiry

Web Page ID: WEnqResult

File Currency: 25AUG 2011

System Date: 26AUG2011

Navigation icons: back, forward, All Pages, search, refresh

Show All Pages

Note: All pages have been returned.

Type of Search	Business Debtor						
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED						
File Currency	25AUG 2011						
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status
	636986493	1	7	1	13	05JUL 2012	

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN

File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period
636986493		01	001		20070705 1452 1530 9086	P PPSA	5

Individual Debtor	Date of Birth	First Given Name	Initial	Surname
Business Debtor	Business Debtor Name			Ontario Corporation No.
	HEALTHSCREEN SOLUTIONS INCORPORATED			
	Address	City	Province	Postal Code
	110 HANOVER DR SUITE 101	ST. CATHARINES	ON	L2W 1A4

Individual Debtor	Date of Birth	First Given Name	Initial	Surname
Business Debtor	Business Debtor Name			Ontario Corporation No.
	Address	City	Province	Postal Code

Secured Party	Secured Party / Lien Claimant			
	ROYAL BANK OF CANADA			
	Address	City	Province	Postal Code
	180 WELLINGTON ST W BSC 3RD FL	TORONTO	ON	M5J 1J1

Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
		X	X	X	X	X			

Motor Vehicle Description	Year	Make	Model	V.I.N.

General Collateral Description	General Collateral Description			

Registering Agent	Registering Agent			
	CANADIAN SECURITIES REGISTRATION SYSTEMS			
	Address	City	Province	Postal Code
	4126 NORLAND AVENUE	BURNABY	BC	V5G 3S8

CONTINUED

Type of Search	Business Debtor								
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED								
File Currency	25AUG 2011								
	File Number	Family	of Families	Page	of Pages				
	636986493	1	7	2	13				
FORM 2C FINANCING CHANGE STATEMENT / CHANGE STATEMENT									
	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule Attached	Registration Number	Registered Under			
		01	001		20081022 1450 1530 1453				
Record Referenced	File Number	Page Amended	No Specific Page Amended	Change Required	Renewal Years	Correct Period			
	636986493		X	A AMNDMNT					
Reference Debtor/ Transferor	First Given Name			Initial	Surname				
	Business Debtor Name								
	HEALTHSCREEN SOLUTIONS INCORPORATED								
Other Change	Other Change								
Reason / Description	Reason / Description								
	AMEND DEBTOR'S NAME TO - HEALTHSCREEN SOLUTIONS INCORPORATED DUE TO								
	AMALGAMATION								
Debtor/ Transferee	Date of Birth	First Given Name			Initial	Surname			
	Business Debtor Name					Ontario Corporation No.			
	HEALTHSCREEN SOLUTIONS INCORPORATED								
	Address				City	Province	Postal Code		
	110 HANDOVER DR., STE. 101				ST. CATHARINES	ON	L2W 1A4		
Assignor	Assignor								
Secured Party	Secured Party/ Lien Claimant/ Assignee								
	Address				City	Province	Postal Code		
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
Motor Vehicle Description	Year	Make			Model		V.I.N.		
General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent or Secured Party/ Lien Claimant								
	CANADIAN SECURITIES REGISTRATION SYSTEMS								
	Address				City	Province	Postal Code		
	4126 NORLAND AVENUE				BURNABY	BC	V5G 3S8		

END OF FAMILY

Type of Search	Business Debtor						
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED						
File Currency	25AUG 2011						
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status
	641626074	2	7	3	13	27DEC 2014	

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN

File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period
641626074		01	001		20071227 1038 1616 4427	P PPSA	7

Individual Debtor	Date of Birth	First Given Name	Initial	Surname
Business Debtor	Business Debtor Name			Ontario Corporation No.
	HEALTHSCREEN SOLUTIONS INCORPORATED			
	Address		City	Province Postal Code
	1203-80 BLOOR ST W		TORONTO	ON M5S 2V1

Individual Debtor	Date of Birth	First Given Name	Initial	Surname
Business Debtor	Business Debtor Name			Ontario Corporation No.
	Address		City	Province Postal Code

Secured Party	Secured Party / Lien Claimant			
	CIT FINANCIAL LTD.			
	Address		City	Province Postal Code
	5035 SOUTH SERVICE ROAD		BURLINGTON	ON L7R 4C8

Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
			X		X				

Motor Vehicle Description	Year	Make	Model	V.I.N.

General Collateral Description	General Collateral Description
	CANON COPIER

Registering Agent	Registering Agent			
	JCLD ONLINE			
	Address		City	Province Postal Code
	16-1375 SOUTHDOWN RD STE 322		MISSISSAUGA	ONT L5J 2Z1

END OF FAMILY

Type of Search	Business Debtor						
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED						
File Currency	25AUG 2011						
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status
	645152868	3	7	4	13	14MAY 2013	

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN

	Caution	Total	Motor Vehicle	Registered	Registration

File Number	Filing	Page of	Pages	Schedule	Registration Number	Under	Period		
645152868		001	2		20080514 1127 1590 1248	P PPSA	5		
Individual Debtor	Date of Birth	First Given Name		Initial	Surname				
Business Debtor	Business Debtor Name					Ontario Corporation No.			
	HEALTHSCREEN SOLUTIONS INCORPORATED								
	Address			City	Province	Postal Code			
	80 BLOOR STREET WEST, SUITE 1101			TORONTO	ON	M5S 2V1			
Individual Debtor	Date of Birth	First Given Name		Initial	Surname				
Business Debtor	Business Debtor Name					Ontario Corporation No.			
	Address			City	Province	Postal Code			
Secured Party	Secured Party / Lien Claimant								
	WF FUND III LIMITED PARTNERSHIP, CARRYING ON BUSINESS AS WELLINGTON								
	Address			City	Province	Postal Code			
	161 BAY STREET, SUITE 2520			TORONTO	ON	M5J 2S1			
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
		X	X	X	X	X			
Motor Vehicle Description	Year	Make		Model		V.I.N.			
General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent								
	STIKEMAN ELLIOTT LLP								
	Address			City	Province	Postal Code			
	199 BAY ST, 5300 COMMERCE COURT WEST			TORONTO	ON	M5L 1B9			

CONTINUED

Type of Search	Business Debtor								
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED								
File Currency	25AUG 2011								
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status		
	645152868	3	7	5	13	14MAY 2013			
FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN									
File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period		
645152868		002	2		20080514 1127 1590 1248				
Individual Debtor	Date of Birth	First Given Name		Initial	Surname				
Business Debtor	Business Debtor Name					Ontario Corporation No.			
	Address			City	Province	Postal Code			

Individual Debtor	Date of Birth	First Given Name			Initial	Surname			
Business Debtor	Business Debtor Name					Ontario Corporation No.			
	Address			City	Province	Postal Code			
Secured Party	Secured Party / Lien Claimant								
	FINANCIAL LP AND WELLINGTON FINANCIAL FUND III								
	Address			City	Province	Postal Code			
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
Motor Vehicle Description	Year	Make		Model		V.I.N.			
General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent								
	Address			City	Province	Postal Code			

CONTINUED

Type of Search	Business Debtor							
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED							
File Currency	25AUG 2011							
	File Number	Family	of Families	Page	of Pages			
	645152868	3	7	6	13			
FORM 2C FINANCING CHANGE STATEMENT / CHANGE STATEMENT								
	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule Attached	Registration Number		Registered Under	
		001	2		20110726 1506 1590 5676			
Record Referenced	File Number	Page Amended	No Specific Page Amended	Change Required		Renewal Years	Correct Period	
	645152868			D ASSGNMT				
Reference Debtor/ Transferor	First Given Name			Initial	Surname			
	Business Debtor Name							
	HEALTHSCREEN SOLUTIONS INCORPORATED							
Other Change	Other Change							
Reason / Description	Reason / Description							
Debtor/ Transferee	Date of Birth	First Given Name			Initial	Surname		

Business Debtor Name		Ontario Corporation No.	
Address		City	Province Postal Code
Assignor	Assignor		
	FINANCIAL LP AND WELLINGTON FINANCIAL FUND III		
Secured Party	Secured Party/ Lien Claimant/ Assignee		
	Address	City	Province Postal Code
Collateral Classification	Consumer Goods	Inventory	Equipment
	Accounts	Other	Motor Vehicle Included
	Amount	Date of Maturity or	No Fixed Maturity Date
Motor Vehicle Description	Year	Make	Model
			V.I.N.
General Collateral Description	General Collateral Description		
Registering Agent	Registering Agent or Secured Party/ Lien Claimant		
	Address	City	Province Postal Code

END OF FAMILY

Type of Search	Business Debtor						
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED						
File Currency	25AUG 2011						
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status
	668581056	4	7	8	13	28MAR 2016	

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN

File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period
668581056		001	001		20110328 1237 1031 7175	P PPSA	05
Individual Debtor	Date of Birth	First Given Name		Initial	Surname		
Business Debtor	Business Debtor Name					Ontario Corporation No.	
	HEALTHSCREEN SOLUTIONS INCORPORATED						
	Address			City	Province	Postal Code	
	1200-80 BLOOR ST W			TORONTO	ON	M5S 2V1	
Individual Debtor	Date of Birth	First Given Name		Initial	Surname		
Business Debtor	Business Debtor Name					Ontario Corporation No.	
	Address			City	Province	Postal Code	
Secured Party	Secured Party / Lien Claimant						
	HER MAJESTY IN RIGHT OF ONTARIO REPRESENTED BY THE MINISTER OF REVENUE						
	Address			City	Province	Postal Code	

300-1400 BLAIR PL (ONT#101472385) T261					OTTAWA	ON	K1J 9B8		
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
		X	X	X	X		144061	28MAR2016	
Motor Vehicle Description	Year	Make			Model		V.I.N.		
General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent								
	MINISTRY OF REVENUE, REVENUE COLLECTIONS BRANCH, R. KIRSHNER								
	Address				City	Province	Postal Code		
	300-1400 BLAIR PL				OTTAWA	ON	K1J 9B8		
END OF FAMILY									
Type of Search	Business Debtor								
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED								
File Currency	25AUG 2011								
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status		
	671036688	5	7	9	13	28JUN 2013			
FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN									
File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number		Registered Under	Registration Period	
671036688		01	001		20110628 1449 8028 3083		P PPSA	2	
Individual Debtor	Date of Birth		First Given Name		Initial		Surname		
Business Debtor	Business Debtor Name						Ontario Corporation No.		
	HEALTHSCREEN SOLUTIONS INCORPORATED								
	Address				City	Province	Postal Code		
	80 BLOOR STREET WEST, SUITE 1101				TORONTO	ONT	M5S 2V1		
Individual Debtor	Date of Birth		First Given Name		Initial		Surname		
Business Debtor	Business Debtor Name						Ontario Corporation No.		
	Address				City	Province	Postal Code		
Secured Party	Secured Party / Lien Claimant								
	JUSTIN BELOBABA								
	Address				City	Province	Postal Code		
	68 YORKVILLE AVENUE, SUITE 401				TORONTO	ONT	M5R 3V7		
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
		X	X	X	X	X			
Motor Vehicle Description	Year	Make			Model		V.I.N.		

General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent								
	BORDEN LADNER GERVAIS LLP (A. BUNSTON)								
	Address			City		Province		Postal Code	
	40 KING STREET WEST, SUITE 4400			TORONTO		ONT		M5H 3Y4	
END OF FAMILY									
Type of Search	Business Debtor								
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED								
File Currency	25AUG 2011								
	File Number	Family	of Families	Page	of Pages	Expiry Date		Status	
	671064336	6	7	10	13	29JUN 2013			
FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN									
File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number		Registered Under	Registration Period	
671064336		01	001		20110629 1046 8028 3091		P PPSA	2	
Individual Debtor	Date of Birth		First Given Name			Initial		Surname	
Business Debtor	Business Debtor Name							Ontario Corporation No.	
	HEALTHSCREEN SOLUTIONS INCORPORATED								
	Address			City		Province		Postal Code	
	80 BLOOR STREET WEST, SUITE 1101			TORONTO		ONT		M5S 2V1	
Individual Debtor	Date of Birth		First Given Name			Initial		Surname	
Business Debtor	Business Debtor Name							Ontario Corporation No.	
	Address			City		Province		Postal Code	
Secured Party	Secured Party / Lien Claimant								
	AZEDOMINE INC.								
	Address			City		Province		Postal Code	
	68 YORKVILLE AVENUE, SUITE 401			TORONTO		ONT		M5R 3V7	
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
		X	X	X	X	X			
Motor Vehicle Description	Year	Make			Model		V.I.N.		
General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent								
	BORDEN LADNER GERVAIS LLP (A. BUNSTON)								
	Address			City		Province		Postal Code	
	40 KING STREET WEST, SUITE 4400			TORONTO		ONT		M5H 3Y4	
END OF FAMILY									

Type of Search		Business Debtor							
Search Conducted On		HEALTHSCREEN SOLUTIONS INCORPORATED							
File Currency		25AUG 2011							
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status		
	890660502	7	7	11	13	16AUG 2011	D DISCHARGED		
FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN									
File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period		
890660502		01	001		20030108 1032 1529 6666	P PPSA	7		
Individual Debtor	Date of Birth	First Given Name			Initial	Surname			
Business Debtor	Business Debtor Name					Ontario Corporation No.			
	HEALTHSCREEN SOLUTIONS INCORPORATED								
	Address			City	Province	Postal Code			
	110B HANNOVER DRIVE, SUITE 101			ST. CATHARINES	ON	L2W 1A4			
Individual Debtor	Date of Birth	First Given Name			Initial	Surname			
Business Debtor	Business Debtor Name					Ontario Corporation No.			
	Address			City	Province	Postal Code			
Secured Party	Secured Party / Lien Claimant								
	BUSINESS DEVELOPMENT BANK OF CANADA								
	Address			City	Province	Postal Code			
	39 QUEEN STREET, SUITE 100, BOX 1193			ST. CATHARINES	ON	L2R 7A7			
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
		X	X	X	X	X			
Motor Vehicle Description	Year	Make			Model		V.I.N.		
General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent								
	SULLIVAN MAHONEY LLP								
	Address			City	Province	Postal Code			
	40 QUEEN STREET, BOX 1360			ST. CATHARINES	ON	L2R 6Z2			
CONTINUED									
Type of Search		Business Debtor							
Search Conducted On		HEALTHSCREEN SOLUTIONS INCORPORATED							
File Currency		25AUG 2011							
	File Number	Family	of Families	Page	of Pages				
	890660502	7	7	12	13				
FORM 2C FINANCING CHANGE STATEMENT / CHANGE STATEMENT									
	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule Attached	Registration Number	Registered Under			
		001	1		20090430 1656 2611 7283				

Record Referenced	File Number	Page Amended	No Specific Page Amended	Change Required	Renewal Years	Correct Period			
	890660502			B RENEWAL	04				
Reference Debtor/ Transferor	First Given Name		Initial	Surname					
	Business Debtor Name								
	HEALTHSCREEN SOLUTIONS INCORPORATED								
Other Change	Other Change								
Reason / Description	Reason / Description								
Debtor/ Transferee	Date of Birth	First Given Name		Initial	Surname				
	Business Debtor Name					Ontario Corporation No.			
	Address			City	Province	Postal Code			
Assignor	Assignor								
Secured Party	Secured Party/ Lien Claimant/ Assignee								
	Address			City	Province	Postal Code			
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
Motor Vehicle Description	Year	Make			Model	V.I.N.			
General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent or Secured Party/ Lien Claimant								
	BDC JG								
	Address				City	Province	Postal Code		
	150 KING STREET WEST, SUITE 1101				TORONTO	ON	M5H 1J9		

CONTINUED

Type of Search	Business Debtor				
Search Conducted On	HEALTHSCREEN SOLUTIONS INCORPORATED				
File Currency	25AUG 2011				
	File Number	Family	of Families	Page	of Pages
	890660502	7	7	13	13

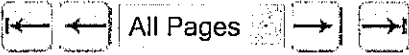
FORM 2C FINANCING CHANGE STATEMENT / CHANGE STATEMENT

	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule Attached	Registration Number	Registered Under
		001	1		20110816 1648 2611 1095	

Record Referenced	File Number	Page Amended	No Specific Page Amended	Change Required	Renewal Years	Correct Period			
	890660502			C DISCHRG					
Reference Debtor/ Transferor	First Given Name		Initial	Surname					
	Business Debtor Name								
	HEALTHSCREEN SOLUTIONS INCORPORATED								
Other Change	Other Change								
Reason / Description	Reason / Description								
Debtor/ Transferee	Date of Birth	First Given Name		Initial	Surname				
	Business Debtor Name				Ontario Corporation No.				
	Address			City	Province	Postal Code			
Assignor	Assignor								
Secured Party	Secured Party/ Lien Claimant/ Assignee								
	Address			City	Province	Postal Code			
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
Motor Vehicle Description	Year	Make		Model		V.I.N.			
General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent or Secured Party/ Lien Claimant								
	BDC LEGAL - CD (020167)								
	Address			City	Province	Postal Code			
	121 KING STREET WEST, 1200			TORONTO	ON	M5H 3T9			

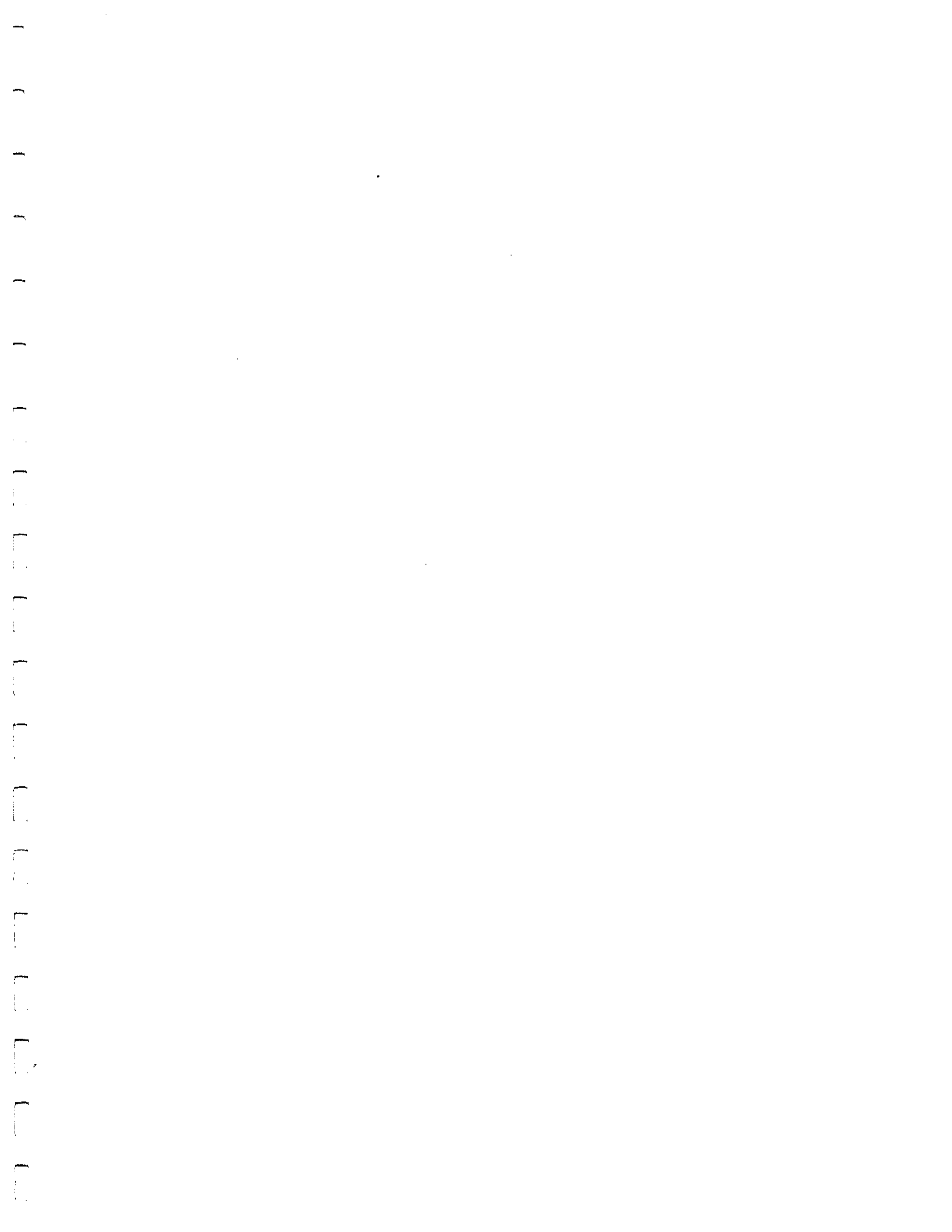
LAST PAGE
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Web Page ID: WEnqResult

File Currency: 25AUG 2011

System Date: 26AUG2011

Navigation icons: Home, Previous, All Pages, Next, End

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Type of Search	Business Debtor						
Search Conducted On	MEDICAL TELECOM CORPORATION						
File Currency	25AUG 2011						
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status
	607398471	1	3	1	5	16JUL 2014	

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN

File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period
607398471		01	001		20040716 1942 1531 5372	P PPSA	5

Individual Debtor	Date of Birth	First Given Name	Initial	Surname

Business Debtor	Business Debtor Name	Ontario Corporation No.		
	1616340 ONTARIO INC			
	Address	City	Province	Postal Code
	586 EGLINTON AVE E STE 301	TORONTO	ON	M4P 1P2

Individual Debtor	Date of Birth	First Given Name	Initial	Surname

Business Debtor	Business Debtor Name	Ontario Corporation No.		
	MEDICAL TELECOM CORPORATION			
	Address	City	Province	Postal Code
	586 EGLINTON AVE E STE 301	TORONTO	ON	M4P 1P2

Secured Party	Secured Party / Lien Claimant			
	THE TORONTO-DOMINION BANK - QUEEN ST & SPADINA 17042 CAS 3472			
	Address	City	Province	Postal Code
	443 QUEEN ST W & SPADINA AVE	TORONTO	ON	M5V 2B1

Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
		X	X	X	X	X			X

Motor Vehicle Description	Year	Make	Model	V.I.N.

General Collateral Description	General Collateral Description

Registering Agent	Registering Agent			
	CANADIAN SECURITIES REGISTRATION SYSTEMS			
	Address	City	Province	Postal Code
	SUITE 180-13571 COMMERCE PARKWAY	RICHMOND	BC	V6V2L1

CONTINUED

Type of Search	Business Debtor				
Search Conducted On	MEDICAL TELECOM CORPORATION				
File Currency	25AUG 2011				
	File Number	Family	of Families	Page	of Pages
	607398471	1	3	2	5

FORM 2C FINANCING CHANGE STATEMENT / CHANGE STATEMENT

	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule Attached	Registration Number	Registered Under
		01	001		20090527 1948 1531 5416	

Record Referenced	File Number	Page Amended	No Specific Page Amended	Change Required	Renewal Years	Correct Period
	607398471		X	B RENEWAL	5	

Reference Debtor/ Transferor	First Given Name	Initial	Surname
	Business Debtor Name		
	1616340 ONTARIO INC		

Other Change	Other Change

Reason / Description	Reason / Description

Debtor/ Transferee	Date of Birth	First Given Name	Initial	Surname
	Business Debtor Name			Ontario Corporation No.
	Address	City	Province	Postal Code

Assignor	Assignor

Secured Party	Secured Party/ Lien Claimant/ Assignee			
	Address	City	Province	Postal Code

Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date

Motor Vehicle Description	Year	Make	Model	V.I.N.

General Collateral Description	General Collateral Description

Registering Agent	Registering Agent or Secured Party/ Lien Claimant			
	CANADIAN SECURITIES REGISTRATION SYSTEMS			
	Address	City	Province	Postal Code
	4126 NORLAND AVENUE	BURNABY	BC	V5G 3S8

END OF FAMILY

Type of Search	Business Debtor						
Search Conducted On	MEDICAL TELECOM CORPORATION						
File Currency	25AUG 2011						
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status
	642938391	2	3	3	5	26FEB 2013	

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN

File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period
642938391		01	001		20080226 1449 1530 7190	P PPSA	5

Individual Debtor	Date of Birth	First Given Name	Initial	Surname

Business Debtor	Business Debtor Name	Ontario Corporation No.
	MEDICAL TELECOM CORPORATION	
	Address	City
	80 BLOOR STREET WEST SUITE 1203	TORONTO
	Province	Postal Code
	ON	M5S 2V1

Individual Debtor	Date of Birth	First Given Name	Initial	Surname

Business Debtor	Business Debtor Name	Ontario Corporation No.
	Address	City
	Province	Postal Code

Secured Party	Secured Party / Lien Claimant
	ALLIANCE FUNDING CORPORATION
	Address
	300 THE EAST MALL, SUITE 401
	City
	TORONTO
	Province
	ON
	Postal Code
	M9B 6B7

Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
			X		X				

Motor Vehicle Description	Year	Make	Model	V.I.N.

General Collateral Description	General Collateral Description

Registering Agent	Registering Agent
	CANADIAN SECURITIES REGISTRATION SYSTEMS
	Address
	4126 NORLAND AVENUE
	City
	BURNABY
	Province
	BC
	Postal Code
	V5G 3S8

END OF FAMILY

Type of Search	Business Debtor						
Search Conducted On	MEDICAL TELECOM CORPORATION						
File Currency	25AUG 2011						
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status
	645152886	3	3	4	5	14MAY 2013	

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN

Caution	Total	Motor Vehicle	Registered	Registration

File Number	Filing	Page of	Pages	Schedule	Registration Number	Under	Period		
645152886		001	2		20080514 1128 1590 1249	P PPSA	5		
Individual Debtor	Date of Birth	First Given Name		Initial	Surname				
Business Debtor	Business Debtor Name					Ontario Corporation No.			
	MEDICAL TELECOM CORPORATION								
	Address			City	Province	Postal Code			
	80 BLOOR STREET WEST, SUITE 1101			TORONTO	ON	M5S 2V1			
Individual Debtor	Date of Birth	First Given Name		Initial	Surname				
Business Debtor	Business Debtor Name					Ontario Corporation No.			
	Address			City	Province	Postal Code			
Secured Party	Secured Party / Lien Claimant								
	WF FUND III LIMITED PARTNERSHIP, CARRYING ON BUSINESS AS WELLINGTON								
	Address			City	Province	Postal Code			
	161 BAY STREET, SUITE 2520			TORONTO	ON	M5J 2S1			
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
		X	X	X	X	X			
Motor Vehicle Description	Year	Make		Model		V.I.N.			
General Collateral Description	General Collateral Description								
Registering Agent	Registering Agent								
	STIKEMAN ELLIOTT LLP								
	Address			City	Province	Postal Code			
	199 BAY ST, 5300 COMMERCE COURT WEST			TORONTO	ON	M5L 1B9			

CONTINUED

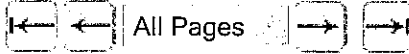
Type of Search	Business Debtor								
Search Conducted On	MEDICAL TELECOM CORPORATION								
File Currency	25AUG 2011								
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status		
	645152886	3	3	5	5	14MAY 2013			

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN							
File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period
645152886		002	2		20080514 1128 1590 1249		
Individual Debtor	Date of Birth	First Given Name		Initial	Surname		
Business Debtor	Business Debtor Name					Ontario Corporation No.	
	Address			City	Province	Postal Code	

Individual Debtor		Date of Birth	First Given Name			Initial	Surname			
Business Debtor		Business Debtor Name					Ontario Corporation No.			
		Address			City	Province	Postal Code			
Secured Party		Secured Party / Lien Claimant								
		FINANCIAL LP AND WELLINGTON FINANCIAL FUND III								
		Address			City	Province	Postal Code			
Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date	
Motor Vehicle Description		Year	Make		Model		V.I.N.			
General Collateral Description		General Collateral Description								
Registering Agent		Registering Agent								
		Address			City	Province	Postal Code			

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Type of Search	Business Debtor						
Search Conducted On	1589681 ONTARIO LIMITED						
File Currency	25AUG 2011						
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status
	645152904	1	1	1	2	14MAY 2013	

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN

File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period
645152904		001	2		20080514 1129 1590 1250	P PPSA	5

Individual Debtor	Date of Birth	First Given Name	Initial	Surname
Business Debtor	Business Debtor Name			Ontario Corporation No.
	1589681 ONTARIO LIMITED			
	Address		City	Province
80 BLOOR STREET WEST, SUITE 1101		TORONTO	ON	M5S 2V1

Individual Debtor	Date of Birth	First Given Name	Initial	Surname
Business Debtor	Business Debtor Name			Ontario Corporation No.
	Address		City	Province

Secured Party	Secured Party / Lien Claimant			
	WF FUND III LIMITED PARTNERSHIP, CARRYING ON BUSINESS AS WELLINGTON			
	Address		City	Province
161 BAY STREET, SUITE 2520		TORONTO	ON	M5J 2S1

Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date
		X	X	X	X	X			

Motor Vehicle Description	Year	Make	Model	V.I.N.

General Collateral Description	General Collateral Description			

Registering Agent	Registering Agent			
	STIKEMAN ELLIOTT LLP			
	Address		City	Province
199 BAY ST, 5300 COMMERCE COURT WEST		TORONTO	ON	M5L 1B9

CONTINUED

Type of Search	Business Debtor						
Search Conducted On	1589681 ONTARIO LIMITED						
File Currency	25AUG 2011						
	File Number	Family	of Families	Page	of Pages	Expiry Date	Status
	645152904	1	1	2	2	14MAY 2013	

FORM 1C FINANCING STATEMENT / CLAIM FOR LIEN

File Number	Caution Filing	Page of	Total Pages	Motor Vehicle Schedule	Registration Number	Registered Under	Registration Period
645152904		002	2		20080514 1129 1590 1250		

Individual Debtor	Date of Birth	First Given Name	Initial	Surname
Business Debtor	Business Debtor Name			Ontario Corporation No.
	Address			City
			Province	Postal Code

Individual Debtor	Date of Birth	First Given Name	Initial	Surname
Business Debtor	Business Debtor Name			Ontario Corporation No.
	Address			City
			Province	Postal Code

Secured Party	Secured Party / Lien Claimant			
	FINANCIAL LP AND WELLINGTON FINANCIAL FUND III			
	Address			City
			Province	Postal Code

Collateral Classification	Consumer Goods	Inventory	Equipment	Accounts	Other	Motor Vehicle Included	Amount	Date of Maturity or	No Fixed Maturity Date

Motor Vehicle Description	Year	Make	Model	V.I.N.

General Collateral Description	General Collateral Description

Registering Agent	Registering Agent			
	Address			City
			Province	Postal Code

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