

CHANGE OF ADDRESS NOTIFICATION FORM

Please mail or fax this form to:

215 - 515 West Pender Street
Vancouver, BC V6B 6H5
Fax: 604-876-5564

Date: _____

I, THE RIGHTFUL OWNER OF SECURITIES OF _____
Issuer Name

DO HEREBY AUTHORIZE ALL CORRESPONDENCE TO BE MAILED TO THE FOLLOWING
ADDRESS:

NEW ADDRESS:

Name PRINTED _____

Signature _____

Name PRINTED _____

Signature _____

Telephone: _____ Fax: _____

Email: _____ or _____

**** PLEASE NOTE: This form must be signed by any and all Registered Shareholders, unless other documentation has been provided.**