ocumetics

# Always In Focus

TSX BÖRSE FRANKFURT OTCMarkets

Ocumetics Technology Corp. Investor Presentation 2025

# DISCLAIMER

Nothing contained in this presentation is or shall be relied upon as a promise, guarantee, representation of or warranty specific or implied as to future performance of Ocumetics Technology Corp. The forward-looking statements contained in this presentation are expressly qualified in their entirety by this cautionary statement. Certain statements in this document constitute forward-looking statements. These statements relate to future events or our future technological or financial performance and can be identified by expressions such as “targeted”, “may”, “will”, “should”, “expect”, “plan”, “anticipate”, “believe”, “estimate”, “predict”, “potential”, or “continue” or the negative of these and other such similar expressions. These statements are only predictions and involve known and unknown risks, uncertainties and other factors that may cause our, or our industry’s actual results, levels of activity, performance or achievements, expressed or implied by these forward-looking statements, to change.

The forward-looking statements made in this presentation are made as of the date hereof and Ocumetics does not undertake any obligation to update such statements to reflect any new information, subsequent results or events or otherwise. This presentation does not, and it is not intended to, provide any financial, legal, accounting, or tax advice, and should not be used or relied upon by you as a substitute for your independent research or consultation with your own financial, legal or tax advisers.

This presentation does not constitute an offering memorandum / term sheet nor an offer to sell or solicit to buy securities of Ocumetics. Any information contained in this presentation may change at any time without notice.  Although we believe that the expectations reflected in the forward-looking statements are reasonable, we cannot guarantee future results, levels of activity, performance or achievements. Except as required by applicable laws, we do not intend to update any of the forward-looking statements to conform these statements to actual results. This presentation is not, in whole or in part, intended to be an offering to solicit funds. It is intended for information purposes only.

# COMPANY HIGHLIGHTS

## BACKGROUND

- A Canadian research and product development company that specializes in adaptive intraocular lens designs.
- 15 years of research to develop the Ocumetics Lens.
- Invented and developed by Dr. Garth Webb, largest shareholder and Chairman of the Board.
- Assembled world class medical and regulatory teams.
- Listed on TSX:V (OTC.V), Frankfurt Stock Exchange (2QBO) and OTCQB (OTCFF).

## OCUMETICS LENS

- An accommodating intraocular lens (IOL).
- Natural lens is replaced with the Ocumetics Lens.
- One lens designed to correct near, intermediate and distance vision.
- 30 minute cataract procedure targeted at correcting presbyopia.
- First target market is cataract replacement segment.
- Patents owned by Ocumetics.
- Additional Ocumetics products are at concept stage.
- Successfully completed animal studies.
- First-in-human trials pending.

## DEVELOPMENT ROADMAP

**2025**
- Begin first-in-human (FIH) clinical trial
- Receive preliminary feedback from FIH clinical trial
- FDA IDE submission

**2026**
- Submit final report for FIH clinical trial
- Begin multi-center pivotal clinical trial Phase 1
- FDA IDE annual report and interim analysis

**2027**
- Begin multi-center pivotal clinical trial Phase 2
- Regulatory submission (Latin America)
- FDA pre-PMA submission
- ISO 13485 audit (Europe and Canada)
- FDA PMA submission

**2028**
- Potential FDA PMA approval
- CE Mark and Health Canada submission
- Potential CE Mark and Health Canada approvals

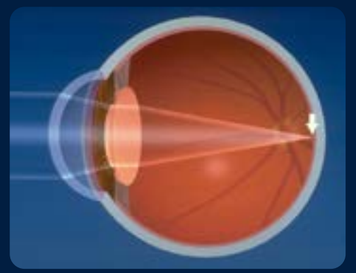
The Ocumetics Lens has global market potential.

ocumetics

The human eye is a marvel of nature.

# HOW THE EYE WORKS

## HOW LIGHT ENTERS THE EYE



LEARN MORE

Light rays enter the eye through the cornea and the pupil and pass through the lens.

The cornea and lens work together to focus light rays at the focal point on the retina in the back of the eye, similar to the way a camera focuses light to form an image on film.

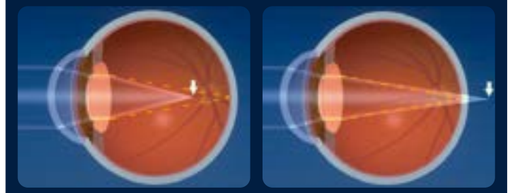
## ACCOMMODATION

LEARN MORE

Accommodation is the ability of the eye to change the shape of the lens to keep an object in focus on the retina as the object is moved closer to the eye, moving the focal point back onto the retina.

As people age, the lens becomes stiffer and is no longer able to change shape as easily, leading to presbyopia.

## REFRACTIVE ERRORS



Myopia

Hyperopia

LEARN MORE

LEARN MORE

Refractive error means that the shape of your eye does not bend light correctly, resulting in a blurred image.

The main types of refractive errors are myopia (nearsightedness), hyperopia (farsightedness), presbyopia (loss of near vision with age) and astigmatism.

## CATARACTS

LEARN MORE

A cataract is when your eye's natural lens becomes cloudy. Proteins in your lens break down and cause things to look blurry, hazy or less colorful.

Cataracts are very common as you get older. Over 50% of Americans over the age of 80 have had cataracts.[1]

## DEFINITIONS

**Cornea**: The transparent, protective layer forming the front of the eye.

**Iris**: A flat, colored, ring-shaped membrane with an adjustable circular opening (pupil) in the center. It is an adjustable diaphragm for regulating the size of the pupil and the admission of light to a lens.

**Pupil**: The dark circular opening in the center of the iris that regulates the amount of light reaching the retina.

**Lens**: Flexible spherical body that changes shape to focus light rays to allow the eye to sharpen focus on near, intermediate and distance objects.

**Accommodation**: The process by which the eye changes optical power to maintain a clear image or focus on an object as its distance varies.

**Presbyopia**: Farsightedness caused by loss of elasticity of the lens of the eye, occurring typically in middle and old age.

**Myopia (nearsightedness)**: A common vision condition in which light focuses in front of the retina due to the shape of the natural lens. This causes near objects to appear clear, but causes objects further away to appear blurry.

**Hyperopia (farsightedness)**: A common vision condition in which light focuses behind the retina due to the shape of the natural lens. This causes distant objects to appear clear, but causes objects nearby to appear blurry.

**Astigmatism**: Irregular shape of cornea or lens causes light to focus at two different focal points.

**Cataract**: Clouding of the normally clear lens resulting in vision that is blurry, hazy and less colorful.

ocumetics

# Current vision correction treatments have limitations.

# THE PROBLEM

## EYESIGHT DETERIORATION

- The eye deteriorates as we age. The natural lens hardens, loses flexibility and can become cloudy. This leads to eye disorders including presbyopia and cataracts.
- At any one time 2.2 billion people or 29% of the global population requires corrective lenses.[2]
- The prevalence of vision impairment is increasing. It is estimated that 50% of the global population will suffer from myopia by 2050.[3] It is reasonable to assume the prevalence of other vision conditions will also increase as the global population continues to age.

## CURRENT TREATMENT OPTIONS HAVE LIMITATIONS

- Eye glasses and contact lenses are confining, inefficient and are not permanent solutions.
- LASIK and PRK are imperfect treatments with recovery risks. Enhancement surgery may be required after 10 years.[4]
- Surgical lens replacement options (intraocular lenses) also have limitations. Natural vision accommodation is not restored and approximately 25% of individuals will still require corrective lenses after lens replacement for cataracts.[5]

**2.2 BILLION**

Number of individuals that require corrective lenses globally at any one time.

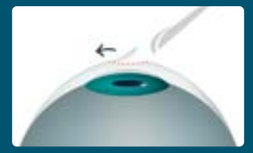
**50%**

Estimated percentage of the global population that will suffer from myopia by 2050.

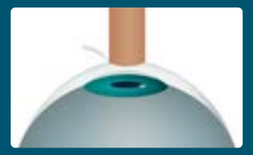
**The natural lens deteriorates with age, and current treatments have limitations.**

# LASIK AND PRK ARE IMPERFECT TREATMENTS

## LASIK EYE SURGERY



Corneal flap is surgically cut open and folded back.



Laser reshapes cornea depending on condition.

LEARN MORE

**LASIK is a type of refractive surgery using a laser to reshape the cornea where the corneal flap is folded back.**

### LIMITATIONS

- Flap increases chance of ongoing infection, greater damage if the eye is injured.
- Pressure and discomfort post-surgery.
- May need enhancement surgery or corrective lenses after 10 years.
- May increase risk of earlier cataract development.[6]
- 10% of cell tissue (non-regenerative) is eradicated during procedure.

## PHOTOREFRACTIVE KERATECTOMY (PRK)

Outer corneal layer removed completely.

Laser reshapes cornea depending on condition.

LEARN MORE

**PRK is a type of refractive surgery using a laser to reshape the cornea where the outer corneal layer is removed completely.**

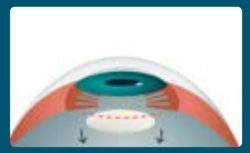
### LIMITATIONS

- Recovery takes one month to see clearly.
- Pressure and discomfort post-surgery.
- May need enhancement surgery or corrective lenses after 10 years.
- May increase risk of earlier cataract development.
- 10% of cell tissue (non-regenerative) is eradicated during procedure.

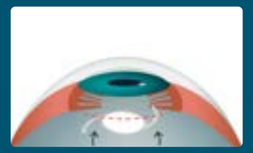
**LASIK and PRK are imperfect treatments with recovery risks and may require enhancements.**

# INTRAOCULAR LENSES (IOLs)

## INTRAOCULAR LENSES (IOL)



Removal of natural lens.



Synthetic lens inserted into lens capsule.

LEARN MORE

An Intraocular Lens is an artificial lens that replaces the focusing power of the natural lens that is surgically removed.

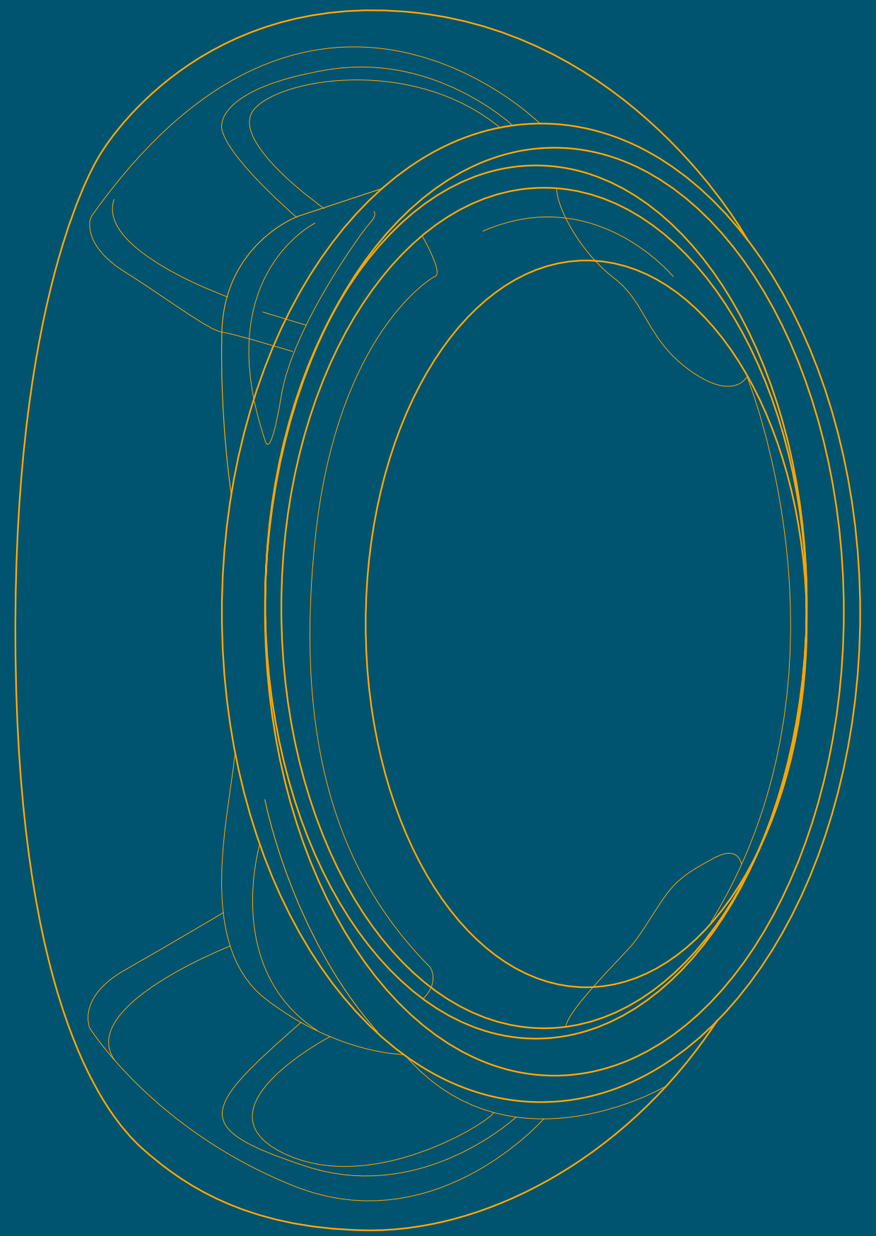
Current IOL options include Monofocal and Multifocal IOLs.

## ABOUT IOLs

- Commonly used in cataract surgery to replace the eye's clouded lens.
- IOLs come in different focusing powers, just like prescription lenses.

## TYPES OF IOLs

- Monofocal IOLs provide clear vision at one distance.
- Multifocal IOLs provide clear vision at near and far distances.
- Accommodating IOLs provide clear vision at all distances (not yet commercially available).



# LIMITATIONS WITH INTRAOCULAR LENSES (IOLs)

## MONOFOCAL IOL

LEARN MORE

Monofocal IOLs provide clear vision at one distance.

### LIMITATIONS

- Static lens, focused on only one fixed distance.
- Glasses are still required after surgery.
- For astigmatism treatments, vision could still be blurred, and patients may still suffer from near or far sightedness.

## MULTIFOCAL IOL

LEARN MORE

Multifocal IOLs provide clear vision at near and far distances.

### LIMITATIONS

- Only focuses on one or a combination of short, intermediate or long distances. Glasses are required for other ranges.
- Patients typically experience issues with halos and glare.
- Patients often experience night vision issues, occasionally requiring a lens exchange.
- Can take months for brain to adjust focus properly.[7]

Current Monofocal and Multifocal IOL options have numerous limitations.

# THE SOLUTION: ACCOMMODATING IOLs

## ACCOMMODATING IOL

LEARN MORE

Accommodating IOLs change shape like the eye's natural lens, facilitating clear vision at various distances.

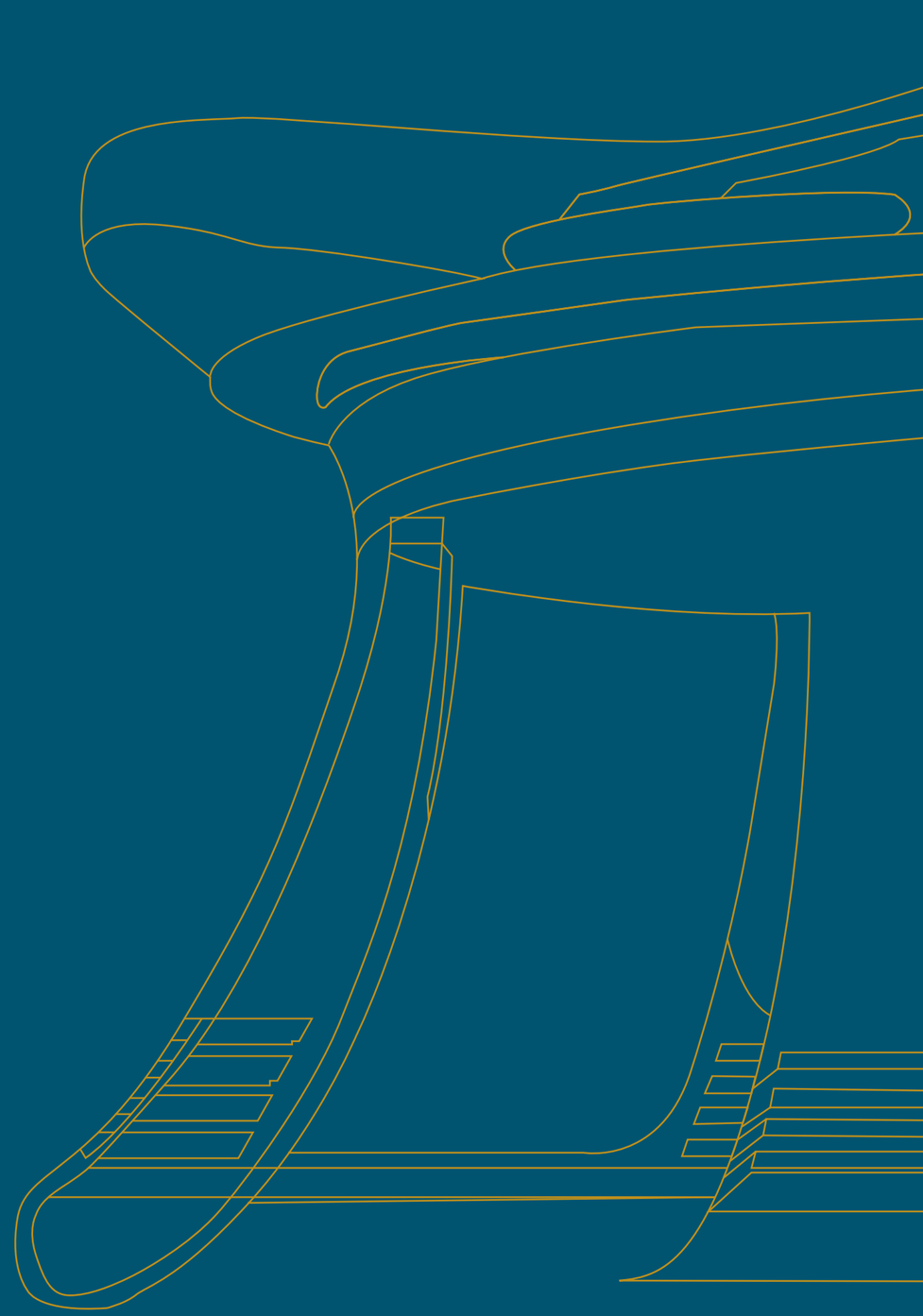
Accommodating IOLs are the future of vision correction surgery.

## ABOUT ACCOMMODATING IOLs

- Accommodating IOLs can move or change shape within the eye.
- Accommodating IOLs have the potential to replicate the natural functionality of the lens.
- Focus at near, far and intermediate distances.

## DESIGN BENEFITS

- Virtually eliminates lifetime need for corrective lenses.[8]
- No associated upkeep or routine replacement of lenses.

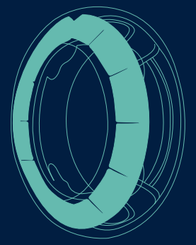


ocumetics

# Imagine a world without the need for corrective lenses.

INTRODUCING THE

# OCUMETICS LENS



# OCUMETICS LENS

An accommodating IOL designed to replicate natural lens functionality and restore clear vision.

## CLEAR VISION AT ALL DISTANCES

Experience the design benefits of clear vision at any distance. Our advanced lens technology is designed to seamlessly shift focus and provide clear vision at near, far and intermediate distances.

## FREEDOM FROM GLASSES AND CONTACTS

Imagine waking up every morning with outstanding vision, without the hassle of fumbling for glasses or inserting contact lenses. Experience the freedom of clear vision without the discomfort of dry eyes or the inconvenience of glasses.

## FACILITATES FUTURE ENHANCEMENTS

The Ocumetics Lens is designed to facilitate future enhancements in vision technology. As advancements continue to be made in accomodative IOL and augmented reality (AR) technologies, our implanted lenses are designed to be compatible with these improvements.

OCUMETICS LENS

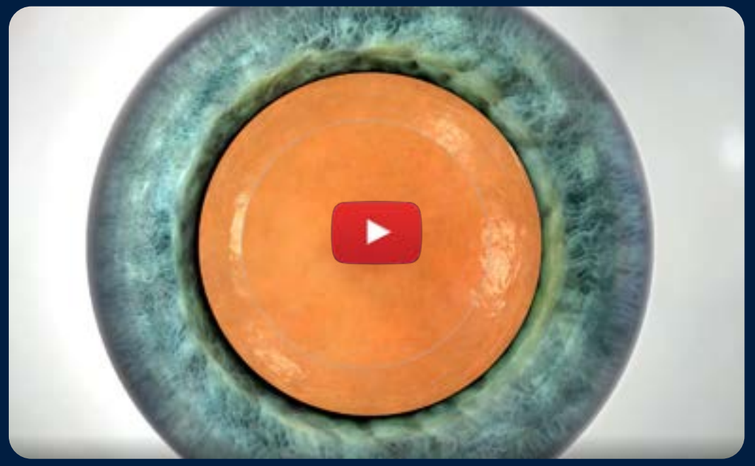
Please Note: The Ocumetics Lens is in pre-clinical trials and all statements regarding functionality have not yet been confirmed with clinical trial results.

# HOW IT WORKS

## HOW IT WORKS

- The Ocumetics Lens suspension system consists of cushions that are designed to self-customize and conform to the unique parameters of each patient's eye.
- The Ocumetics Lens is designed to take advantage of the natural mechanism for accommodation within the human eye. A unique component of the technology is bio-kinetics which is a control system that links into the electrical impulses of natural eye movement.
- Proprietary suspension systems are configured to induce variable prismatic effect in conjunction with curvature change. As the Ocumetics Lens shifts focus from distance to near, base-in prism increases progressively. The effect of this unique capability is unparalleled ease for near-point focus and immediate response to accommodation without lag.
- When the muscles within the eye relax, during sleep, or when the eye focuses upon distant objects, the Ocumetics Lens is designed to compress into a high energy state resulting in a pre-determined change of curvature that prepares the eye for viewing distant objects.
- When the muscles within the eye constrict, much like how the pupil constricts in bright light, the Ocumetics Lens is designed to convert back to its normal resting state, focusing the eye upon close-range objects.
- Kinetic energy transfer occurs almost exclusively within the optical interface as the suspension systems characteristically respond slowly to changes of external force.
- A replaceable anterior optical element provides easy access for lens updates as new technology is developed.

## OCUMETICS LENS DEMO



## DESIGN SPECIFICATIONS

- A unique design element of the Ocumetics Lens proprietary suspension system is the ease for near point focus and the immediate response to accommodation and dis-accommodation without lag.
- An advanced design element of the Ocumetics Lens is the ability to replace the anterior optical element as newer technologies are developed.
- The Ocumetics Lens consists of a medically approved stable and durable material.
- The Ocumetics Lens is designed to fit through a 3.0 mm incision.
- The Ocumetics Lens prototypes have been designed in a bench test to deliver up to 12 diopters of accommodation in conjunction with 6 diopters of base-in prism.

OCUMETICS LENS

Please Note: The Ocumetics Lens is in pre-clinical trials and all statements regarding functionality have not yet been confirmed with clinical trial results.

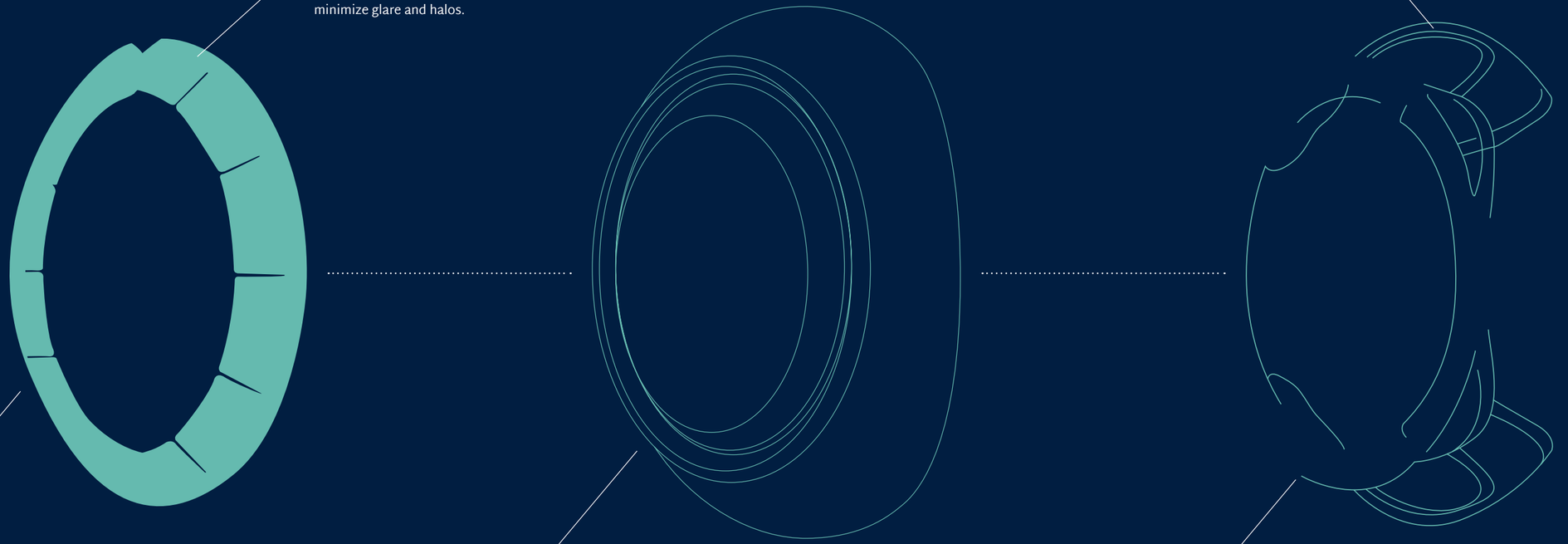
# COMPONENTS

## GLARE ABSORPTION

The lens retainer is specially designed to minimize glare and halos.

## CILIARY CONNECTION

Uses natural kinetics of the eye's ciliary muscles and zonules to adjust lens.



## LENS RETAINER

A docking station for the lens that facilitates future lens enhancements and customization.

## LENS CAPSULE

Adheres to the natural lens capsule, allowing the lens to replicate natural lens functionality.

## SUSPENSION SYSTEM

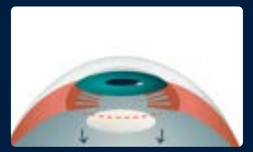
The suspension system consists of cushions that conform to the unique parameters of each patient's eye.

OCUMETICS LENS

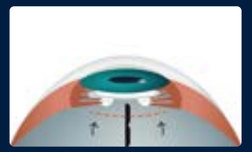
Please Note: The Ocumetics Lens is in pre-clinical trials and all statements regarding functionality have not yet been confirmed with clinical trial results.

# PROCEDURE

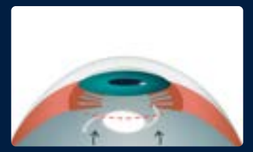
## OCUMETICS LENS PROCEDURE



Removal of natural lens.



Retainer inserted into the lens capsule.



Ocumetics lens inserted into lens capsule.

Ocumetics lens and retainer resting in the lens capsule.

LEARN MORE

### 30 MINUTES

The Ocumetics Lens procedure is expected to take only 30 minutes to complete. This fast and routine procedure will provide patients with a lasting solution to achieve clear vision.

### MINIMALLY INVASIVE

The Ocumetics Lens procedure is designed as a standard surgical operation following the same steps as any cataract lens replacement. The procedure is fast, safe and allows the patient to go home on the same day.

### SUITABLE FOR ALL PRESCRIPTIONS

Almost anyone qualifies for the Ocumetics Lens procedure, regardless of the severity of their prescription.

OCUMETICS LENS

Please Note: The Ocumetics Lens is in pre-clinical trials and all statements regarding functionality have not yet been confirmed with clinical trial results.

# MARKET APPLICATIONS

The Ocumetics lens has immediate market relevancy and immense future potential.

1

## CATARACT EMPHASIS

The initial focus for the Ocumetics Lens is to become the lens of choice for cataract lens replacement surgeries. With over 24 million surgeries annually, this is a massive market opportunity.[9]

2

## GENERAL VISION CORRECTION

Once established in the market, the Ocumetics Lens will be presented as an option for general vision correction (rather than glasses, contacts, LASIK, other IOLs, etc.).

3

## FUTURE DEVELOPMENTS

Our implanted lenses are designed to be compatible with advancements in accommodative IOLs and future technologies like augmented reality (AR).

OCUMETICS LENS

Please Note: The Ocumetics Lens is in pre-clinical trials and all statements regarding functionality have not yet been confirmed with clinical trial results.

ocumetics

Our vision is to
enhance lives, globally.

# TARGET MARKET

The market for IOLs is robust and growing rapidly.

## TARGET MARKET

- Accommodating intraocular lens market segment.
- Individuals over 55 requiring lens replacement due to cataracts.
- Middle class or above.
- Future market potential: Individuals over 25 desiring refractive surgery to replace glasses or contact lenses.

## MARKET RESTRAINTS

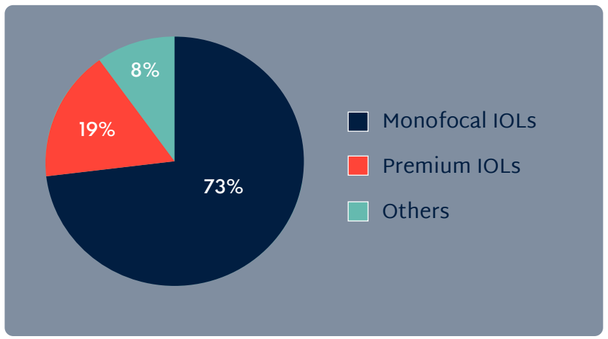
- Minor risk of operative or post-operative complications.
- Perceived high cost, particularly with premium lenses.

## MARKET GROWTH DRIVERS

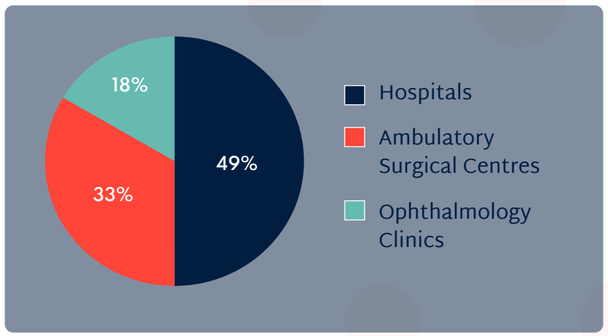
- Aging population and rising income levels.
- Increasing number of cataract surgeries.
- Increased R&D in technologically advanced products.
- Government support and favorable reimbursement.
- Rising prevalence of eye diseases such as refractive errors.
- Increasing awareness of intraocular lenses.
- Rising demand in Asia.
- Reduced incidences of surgical complications with IOL implants in recent years as lens design and surgical techniques improve.

## IOL MARKET ANALYSIS

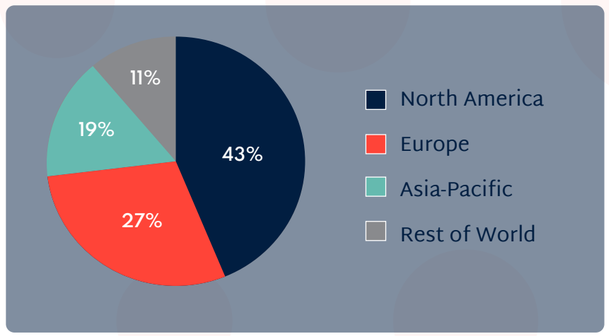
BY TYPE, VALUE SHARE (%), GLOBAL, 2020[10]




BY END-USER, VALUE SHARE (%), GLOBAL, 2020[11]




BY GEOGRAPHY, VALUE SHARE (%), GLOBAL, 2020[12]



# GLOBAL MARKET SIZE

**$158 BILLION**

Global eyewear market (2021) in USD.[13]

**24 MILLION**

Annual global cataract surgeries (2020).[14]

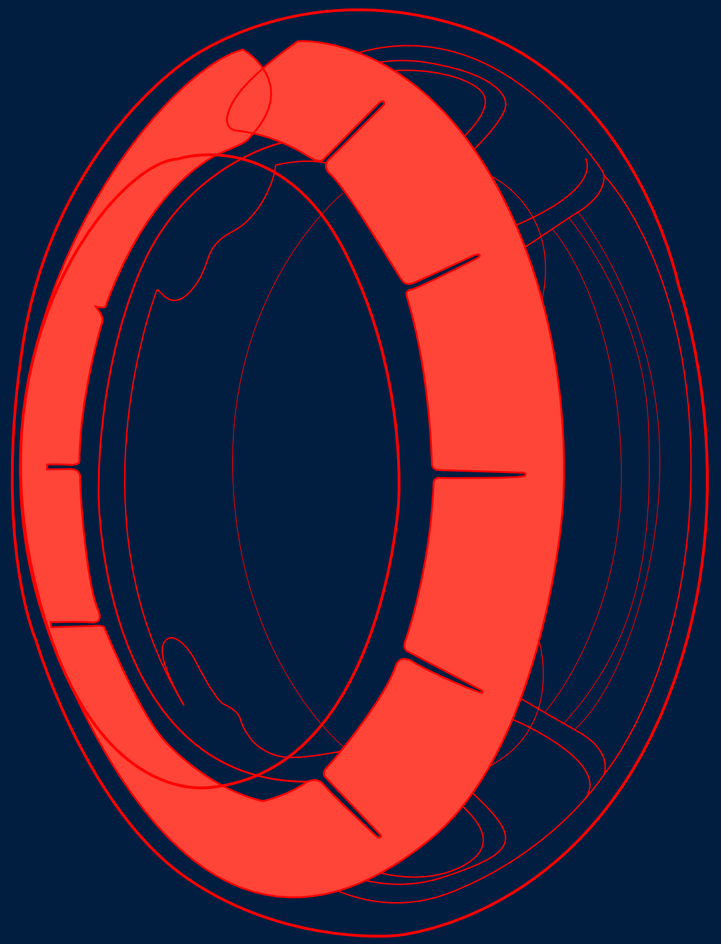
**$6.4 BILLION**

Projected intraocular lens segment by 2030 in USD.[15]

**4.9%**

Intraocular lens segment projected cumulative annual growth rate (2022-2027).[16]

The Ocumetics Lens has global market potential.



# BUSINESS MODEL

## MANUFACTURING

Low cost mass production.

Outsourced production

Production facility

Ocumetics will outsource production until volume warrants investment in strategically located global production facilities.

## DISTRIBUTION

Global sales initiative.

Direct sales

Direct sales to ophthalmologists (managed by Ocumetics) in North America and Europe.

Indirect sales

Sales managed by distributors for the rest of the world (utilization of distribution channels of a large life sciences company).

## RETAIL (CLINIC)

Product sales and procedures.

Product Sales

Clinics earn a fee for every Ocumetics Lens sold. Ocumetics earns a profit on every lens and procedural pack sold.

Procedure

Clinics earn a fee for every Ocumetics Lens surgical procedure.

ocumetics

Ocumetics aims to become a leader in the accommodating IOL segment.

# THE COMPETITION

## ATIA[17]

- Shape-changing, fluid filled based with fixed-power anterior optic for target refraction.
- FIH clinical data 2023.

The absence of commercially available accommodating IOLs highlights the untapped market potential.

## LUMINA[18]

- Modular, two-piece IOL.
- Hydrophilic acrylic material.
- Sulcus-fixated haptics.

## ALCON FLUID VISION[19]

- Silicone oil-filled haptics.
- Accommodative effort moves fluid from haptics to optic, increasing A-P diameter and power of the lens.

## JELLISEE[20]

- One-piece, shape-changing IOL.
- Silicone oil chamber.

## JUENE

- Shape-shifting, fluid-filled optic.
- Capsule-filling base.

The Ocumetics Lens is unique, and the only lens that does not incorporate silicone oil technology.

ocumetics

# Strong partnerships for a strong business.

# PARTNERS

| | |
|---|---|
| AMIPLANT GMBH | Advisor and intraocular lens manufacturer |
| Bioana | Tooling design and manufacturer<br>Prototype lens design and manufacturer |
| Clinical Research Consultants Inc. | Regulatory advisors |
| Medicil | Supplier of intraocular lens injection systems |
| NuSil Avantar | Supplier of the silicon in fabricating the Ocumetics Lens |
| The University of Utah | Animal studies |
| Tingle Merrett LLP | Corporate and securities law |
| Oyen Wiggs Green & Mutala LLP | Intellectual property lawyers/patent agent |
| MNP | Audit and accounting |

# PATENTS & REGULATORY

## REGISTRATIONS

- Filed with The World International Patent Office (WIPO).
- Application for the Inflatable Lens/Lens Retainer registered on Aug 13, 2007.
- Two supplemental submissions registered on Nov 5, 2007 and May 7, 2008.
- Patent applications were examined for Novelty, Inventive Step and Industrial Applicability.
- Patent claims 1-56 were accepted as valid in all categories.
- The Inventive Step cited revolves around the process of inflating a lens retainer to apply pressure upon the posterior lens capsule of the eye to focus upon distant objects.
- This process is essential for bio-mimetic intraocular lens function and is the missing element of all contemporary accommodating lens designs.
- New patent applications disclosing improvements to this original concept have been registered internationally.

## UNITED STATES

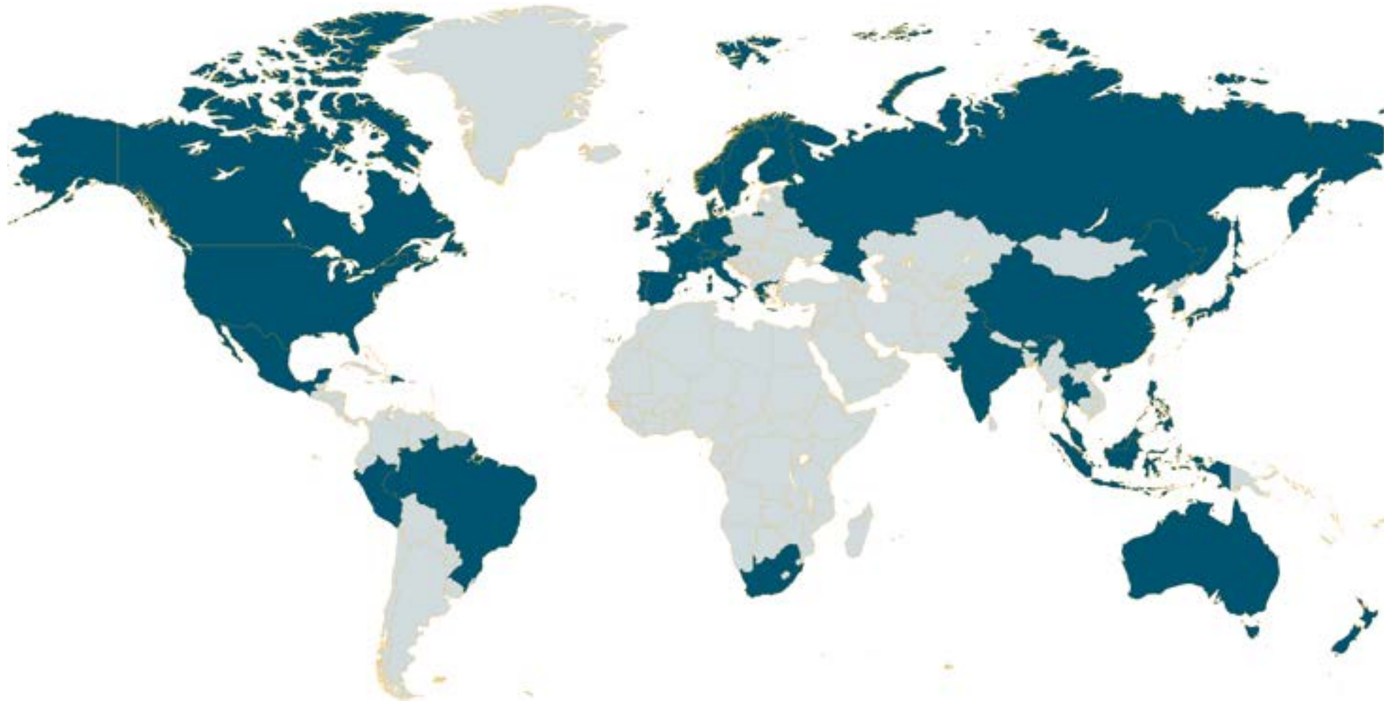
- The Food and Drug Administration (FDA) Centre for Devices and Radiological Health (CDRH) is responsible for regulatory firms who manufacture, repackage and/or relabel medical devices.
- IOLs are class III medical devices that require premarket approval.
- Manufacturers require premarket approval from the FDA before they can commence marketing activities.
- Considered to have toughest standards in the world.

## EUROPE

- ISO certification being pursued: ISO11979 (1-10) and ISO-TR22979-2017.

## REST OF WORLD

- Each country or jurisdiction has a regulatory body similar to the FDA that regulates IOLs.



Countries with patents filed by Ocumetics.

ocumetics

# A clear path to success.

# ROADMAP

**2025**

- Begin first-in-human (FIH) clinical trial
- Receive preliminary feedback from FIH clinical trial
- FDA IDE submission

**2026**

- Submit final report for FIH clinical trial
- Begin multi-center pivotal clinical trial Phase 1
- FDA IDE annual report and interim analysis

**2027**

- Begin multi-center pivotal clinical trial Phase 2
- Regulatory submission (Latin America)
- FDA pre-PMA submission
- ISO 13485 audit (Europe and Canada)
- FDA PMA submission

**2028**

- Potential FDA PMA approval
- CE Mark and Health Canada submission
- Potential CE Mark and Health Canada approvals

ocumetics

# Leadership on all fronts.

# MANAGEMENT TEAM

## DEAN E. BURNS BSc

### PRESIDENT, CEO & DIRECTOR

- Business executive, scientist and medical device brand marketing expert with over 38 years of healthcare experience, including 27 years in eyecare.
- Graduate of Bowling Green University with a BSc in Chemistry and Microbiology.
- Comprehensive business leadership certification from The Wharton Business School, University of Pennsylvania.
- Comprehensive marketing certification from Columbia Business School, Columbia University.
- Founder and CEO of Grit Marketing in Alpharetta, Georgia.
- Former Senior Director at Alcon Vision Cataract Instrumentation and Disposable Technologies ($750M).
- Former Director of Refractive and Vitreoretinal Technologies ($100M).
- Skilled in marketing, sales management, medical and biotechnology devices, regulatory process and advocacy development.
- Awarded 15 industry commercialization/marketing achievement awards, 15 FDA product approvals, 3 medical publications and 1 significant donation to the non-profit organization ORBIS.

## DR. GARTH WEBB

### FOUNDER, CSO & DIRECTOR

- Founder of Ocumetics with a mission to empower people to see and better experience the world.
- 45 years of experience in clinical eye care and applied vision science helping thousands of patients.
- Co-founded Complete Eye Care Optometry Clinic, one of Canada's largest group practice of optometry.
- Sole inventor of the Ocumetics Lens and related intellectual property platform.
- Pioneer in the life enhancing field of medical optics and refractive technologies.
- Founder of the Celebration of Sight Initiative, a not-for-profit organization commissioned to support three areas of critical need: reforestation/conservation, community services and consumer advocacy.
- Founder of VENTURA Health Sciences Corporation in 2008 to develop state-of-the-art functional dietary supplements that slow the progression of degenerative eye conditions. Recent developments have demonstrated promise in stimulating and propagating intracellular repair.
- Pioneered and successfully commercialized delivery systems for non-preserved liquid pharmaceuticals thereby promoting better healing without any complications from contact.
- Served as the youngest Chairperson on record for the Board of Examiners in Optometry, British Columbia, Canada.

# MANAGEMENT TEAM

## DR. DOYLE STULTING

### CMO & DIRECTOR

- Director of the Stulting Research Center, Woolfson Eye Institute, Atlanta, GA.
- Professor of Ophthalmology Emeritus, Emory University.
- Adjunct Professor of Ophthalmology, the Moran Eye Institute, Salt Lake City, UT.
- Former Co-Director of the Collaborative Corneal Transplantation Studies, a large, NIH-supported multi-center study of histocompatibility and corneal transplantation.
- Former investigator in a physician-sponsored clinical investigation of LASIK that was carried out before the first refractive laser was approved by the FDA in the United States.
- Previously had a referral practice in cornea/external disease and performed routine and complex cataract surgery, as well as corneal transplantation.
- Specialized in the management of keratoconus.
- Principal Investigator for 5 different clinical trials for corneal cross-linking since 2008.
- Member of the FDA Ophthalmic Devices Panel for 10 years , and he completed a term as Chair of the Panel in 1998.
- Past President of the American Society for Cataract and Refractive Surgery.

## ROGER JEWETT CA, CPA

### CFO & DIRECTOR

- Hands-on executive with 25+ years of experience leading public and private companies through corporate restructurings, financings and growth.
- Completed debt and equity financings for multiple companies of up to $70M.
- Negotiated and closed the purchase or sale of over 40 businesses.
- Co-founder and Director of Quantum Blockchain Technologies Ltd. (CPC that merged with Ocumetics).
- Founder and CEO of Jump On Flyaways, an airplane sharing service. Led development of proprietary software, appeared on Dragon's Den.
- Former CFO of Enerjet (now Lynx Air), a charter airline. Led Enerjet from significant losses to multiple years of profitability.
- Former CEO of Rare Method (RM), a TSX-V listed interactive marketing firm. Led RM from start-up to the 2nd fastest growing company in Alberta (2007) and top 100 fastest growing company in Canada (2008).
- Former CFO of Resorts of the Canadian Rockies (RCR), a national ski resort operator. Led RCR from financial difficulty to one of the best managed companies in Canada (National Post – 1997 and 1998).
- Former contract or interim CFO for companies in multiple industries (psychedelics, medical devices, helicopter charters, software development, e-commerce, product development, publishing).

# BOARD OF DIRECTORS

## DR. JAMES BARTON MCROBERTS O.D.

### DIRECTOR

- Received Doctorate in Optometry from the University of Waterloo in 1974.
- Optometrist in private practice, West Vancouver and Squamish, British Columbia.
- Past president, British Columbia Association of Optometrists.
- Past Chair and member, BC Board of Examiners in Optometry, British Columbia.
- Past Registrar, BC College of Optometrists.
- Past Professional Services Director, The Laser Center, Vancouver.
- Past Board member and VP, Optometric Services Ltd., Montreal.
- Member Pharmaceutical Committee, BC College of Optometrists.
- Past Chair of Senate, ISYS Medical.
- Member, British Columbia Association of Optometrists.
- Published several articles related to practical optometry, as well as a brief on optometrists' scope of practice for the Health Professions Council of B.C.
- Lectured at professional events as well as in community settings to members of the public.

## ROBERT QUINN

### DIRECTOR

- Independent businessman with years of diverse board,management, and legal international mining industry experience.
- Extensive corporate governance, environmental, transactional, M&A, financing, contract, development, compliance and litigation experience with companies developing and operating numerous mines and conducting exploration programs internationally.
- Juris Doctor degree from the University of Denver School of Law.
- Bachelor's degree of Business Administration from the University of Denver.

## MICHAEL L EDWARDS CPA (CA), CLU

### DIRECTOR

- Director and Registered Dealing Representative of Pinnacle Wealth Brokers Ltd., one of Canada's largest Exempt Market Dealers.
- President and Director of Customized Insurance & Tax Solutions Inc., specializing in insurance and Segregated Fund investment products.
- Holds a Chartered Life Underwriter "CLU" designation and has a life brokers contract for several major life companies through Customized Insurance & Tax Solutions Inc.
- Board member of several private companies.
- Director and member of the Private Capital Markets Association of Canada.
- Board member / committee member and past Chairman of the Board of Beacon House (largest Nova Scotia food bank charity).
- Past Canadian Tax Manager for Michelin Tires Canada Ltd.
- Past Vice President, Finance for a regional residential/commercial real estate development company.
- Worked for several public accounting firms in increasing areas of responsibility and managed two public accounting firms.
- Past President of Halifax Estate Planning Council.
- Past lecturer - Seneca College, York University, CICA tax courses, Atlantic School of Accountancy courses and in-house professional development courses.
- Completed the CICA In-Depth Tax Course.
- Achieved 1979 highest provincial standing on the Uniform Final Exams (P.E.I.).

# INVESTMENT DETAILS

## CAP TABLE (Q4 2025)

| | |
|---|---|
| COMMON SHARES OUTSTANDING | 125,754,391 |
| OPTIONS | 5,753,850 |
| RESTRICTED SHARE UNITS | 5,000,000 |
| WARRANTS | 1,317,730 |
| CONVERTIBLE DEBENTURES | 12,500,000 |
| TOTAL SHARES, FULLY DILUTED | 150,325,971 |

## NOTES

- Completed RTO transaction in Q3 2021
- 2021-2023: Raised CA$4.4M
- 2024: Raised CA$4.4M
- 2025: Raised CA$1.1M
- Common shares trade on TSX:V (OTC.V), Frankfurt Stock Exchange (2QBO) and OTCQB (OTCFF).

## OTC.V: STOCK PERFORMANCE

# CONTACT US


**DEAN E. BURNS**
**PRESIDENT, CEO & DIRECTOR**

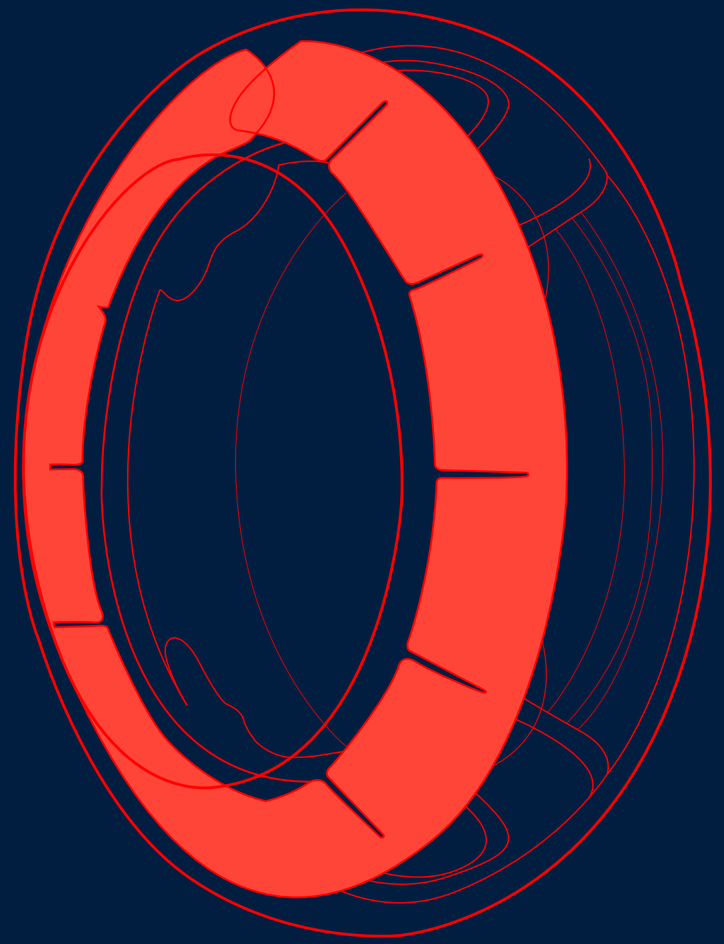
(817) 874-7564

dean.burns@ocumetics.com



Learn more at

ocumetics.com



ocumetics is listed on the TSX:V, Frankfurt Stock Exchange and OTCQB

TSX BÖRSE FRANKFURT OTCMarkets

# REFERENCES


1. National Eye Institute. (2023). Cataracts. nei.nih.gov

2. World Health Organization. (2021). Blindness and vision impairment. who.int

3. Holden, B. A., Fricke, T. R., Wilson, D. A., Jong, M., Naidoo, K. S., Sankaridurg, P., ... & Resnikoff, S. (2016). Global prevalence of myopia and high myopia and temporal trends from 2000 through 2050. Ophthalmology, 123(5), 1036-1042. aaojournal.org

4. Flaxel, C. J. (2019). Post-LASIK enhancement: when and how. American Academy of Ophthalmology. aao.org

5. Nanavaty, M. A., Bedi, K. K., Ali, T. K., & Yap, M. T. (2016). Refractive outcomes of multifocal intraocular lenses versus monofocal intraocular lenses in cataract surgery: A systematic review and meta-analysis. Journal of Cataract and Refractive Surgery, 42(8), 1268-1282. journals.lww.com

6. Schulze, S., Gräf, M., & Junghardt, A. (2009). Incidence of cataract development after laser-assisted in situ keratomileusis. Journal of Refractive Surgery, 25(10), 888-893. journals.healio.com

7. Phillips. (2007). New Lens, Same Brain: The Importance of Neuroadaptation. American Academy of Ophthalmology. aao.org

8. Nuzzi, R., & Tridico, F. (2017). Comparison of visual outcomes, spectacles dependence and patient satisfaction of multifocal and accommodative intraocular lenses: Innovative perspectives for maximal refractive-oriented cataract surgery. Journal of Cataract & Refractive Surgery, 39(3), 387-393. bmcophthalmol.biomedcentral.com

9. Liu, Y., Li, J., & Zhao, D. (2022). Estimating the global number of cataract surgeries in 2020: A systematic review and meta-analysis. British Journal of Ophthalmology. Advance online publication. bjo.bmj.com

10. DelveInsight. (2022). Intraocular Lens: Market Insight, Competitive Landscape and Market Forecast -2027 [Market research report]. delveinsight.com

11. DelveInsight. (2022). Intraocular Lens: Market Insight, Competitive Landscape and Market Forecast -2027 [Market research report]. delveinsight.com

12. DelveInsight. (2022). Intraocular Lens: Market Insight, Competitive Landscape and Market Forecast -2027 [Market research report]. delveinsight.com

13. Grand View Research. (2021). Eyewear market size, share & trends analysis report by product (spectacles, contact lenses, plano sunglasses), by distribution channel (retail stores, online stores), by region, and segment forecasts, 2021-2028. grandviewresearch.com

14. Liu, Y., Li, J., & Zhao, D. (2022). Estimating the global number of cataract surgeries in 2020: A systematic review and meta-analysis. British Journal of Ophthalmology. Advance online publication. bjo.bmj.com

15. Grand View Research. (2021). Intraocular lens market size, share & trends analysis report by product (monofocal, multifocal), by application (cataract surgery, refractive lens exchange), by end use (hospitals, ambulatory surgery centers), and segment forecasts, 2021-2030. grandviewresearch.com

16. DelveInsight. (2022). Intraocular Lens: Market Insight, Competitive Landscape and Market Forecast -2027 [Market research report]. delveinsight.com

17. Atia Vision. (2022). atiavision.com

18. AkkoLens Clinical bv. (2022). akkolens.com

19. Alcon Inc.. (2019). myalcon.com

20. JelliSee Ophthalmics, Inc.. (2021). jellisee.com