OTC Pink Basic Disclosure Guidelines

1) Name of the issuer and its predecessors (if any)

In answering this item, please also provide any names used by predecessor entities in the past five years and the dates of the name changes.

VMS Rehab Systems, Inc.

2) Address of the issuer's principal executive office

Company Headquarters

Address 1: 200-400 Laurier Ave West

Address 2: Ottawa< Ontario, Canada, K1R 7X6

Address 3: _____

Phone: 613-731-5935

Email: info@vmsrehabsystemsinc.com

Website(s): www.vmsrehabsystemsinc.com

IR Contact:

N/A

3) Security Information

Trading Symbol: VRSYF

Exact title and class of securities outstanding: Class B Common Shares

CUSIP: 91830B100

Par or Stated Value: $.10 Par Value

Total shares authorized: Unlimited as of: September 30th, 2016

Total shares outstanding: 42,372,393 as of: September 30th, 016

Additional class of securities (if necessary):

N/A

N/A

C. The number of shares offered;

N/A

D. The number of shares sold;

N/A

E. The price at which the shares were offered, and the amount actually paid to the issuer;

N/A

F. The trading status of the shares; and

N/A

G. Whether the certificates or other documents that evidence the shares contain a legend (1) stating that the shares have not been registered under the Securities Act and (2) setting forth or referring to the restrictions on transferability and sale of the shares under the Securities Act.

N/A

5) Financial Statements

Provide the financial statements described below for the most recent fiscal year end or quarter end to maintain qualification for the OTC Pink Current Information tier. For the initial disclosure statement (qualifying for Current Information for the first time) please provide reports for the two previous fiscal years and any interim periods.

A. Balance sheet;

B. Statement of income;

C. Statement of cash flows;

D. Financial notes; and

E. Audit letter, if audited

The financial statements requested pursuant to this item shall be prepared in accordance with US GAAP by persons with sufficient financial skills.

You may either (i) attach/append the financial statements to this disclosure statement or (ii) post such financial statements through the OTC Disclosure & News Service as a separate report using the appropriate report name for the applicable period end. ("Annual Report," "Quarterly Report" or "Interim Report").

If you choose to publish the financial reports separately as described in part (ii) above, you must state in the accompanying disclosure statement that such financial statements are incorporated by reference. You may reference the document(s) containing the required financial statements by indicating the document name, period end date, and the date that it was posted to otciq.com in the field below.

The following financial statements are incorporated by reference and can be found on OTCIQ. The statements are as follows:

2016 Interim Financials for the period ended September 30, 2016 (posted on the OTCIQ November 15, 2016

Information contained in a Financial Report is considered current until the due date for the subsequent Financial Report. To remain in the OTC Pink Current Information tier, a company must post its Annual Report within 90 days from its fiscal year-end date and Quarterly Reports within 45 days of its fiscal quarter-end date.

6) Describe the Issuer's Business, Products and Services

Describe the issuer's business so a potential investor can clearly understand the company. In answering this item, please include the following:

A. a description of the issuer's business operations;

Development of Generic Pharmaceuticals for men's health and Home Healthcare Products incl Orthopedic Seat Cushions

B. Date and State (or Jurisdiction) of Incorporation:

Incorporated on March 26, 1998 in Ontario Canada

C. the issuer's primary and secondary SIC Codes;

N/A

D. the issuer's fiscal year end date;

December 31st

E. The principal products or services, and their markets;

Home Healthcare Products incl Orthopedic Seat Cushions and the Development of Generic Pharmaceuticals for Men's Health (to be distributed throughout Europe and North America)

7) Describe the Issuer's Facilities

The goal of this section is to provide a potential investor with a clear understanding of all assets, properties or facilities owned, used or leased by the issuer.

In responding to this item, please clearly describe the assets, properties or facilities of the issuer, give the location of the principal plants and other property of the issuer and describe the condition of the properties. If the issuer does not have complete ownership or control of the property (for example, if others also own the property or if there is a mortgage on the property), describe the limitations on the ownership.

If the issuer leases any assets, properties or facilities, clearly describe them as above and the terms of their leases.

N/A

8) Officers, Directors, and Control Persons

The goal of this section is to provide an investor with a clear understanding of the identity of all the persons or entities that are involved in managing, controlling or advising the operations, business development and disclosure of the issuer, as well as the identity of any significant shareholders.

A. Names of Officers, Directors, and Control Persons. In responding to this item, please provide the names of each of the issuer's executive officers, directors, general partners and control persons (control persons are beneficial owners of more than five percent (5%) of any class of the issuer's equity securities), as of the date of this information statement.

The Board of Directors also hold executive positions with the Company. They are follows:

Michael S Wexler	President/CEO/Director
Carol Segal	Non_Executive Director

B. Legal/Disciplinary History. Please identify whether any of the foregoing persons have, in the last five years, been the subject of:

1. A conviction in a criminal proceeding or named as a defendant in a pending criminal proceeding (excluding traffic violations and other minor offenses);

   N/A

2. The entry of an order, judgment, or decree, not subsequently reversed, suspended or vacated, by a court of competent jurisdiction that permanently or temporarily enjoined, barred, suspended or otherwise limited such person's involvement in any type of business, securities, commodities, or banking activities;

   N/A

3. A finding or judgment by a court of competent jurisdiction (in a civil action), the Securities and Exchange Commission, the Commodity Futures Trading Commission, or a state securities regulator of a violation of federal or state securities or commodities law, which finding or judgment has not been reversed, suspended, or vacated; or

   N/A

4. The entry of an order by a self-regulatory organization that permanently or temporarily barred suspended or otherwise limited such person's involvement in any type of business or securities activities.

   N/A

C. Beneficial Shareholders. Provide a list of the name, address and shareholdings or the percentage of shares owned by all persons beneficially owning more than ten percent (10%) of any class of the issuer's equity securities. If any of the beneficial shareholders are corporate shareholders, provide the name and address of the person(s) owning or controlling such corporate shareholders and the resident agents of the corporate shareholders.

Cougar Capital BV (Beneficiary Michael Wexler) 62-64 Keizersgracht 1015CS Amsterdam, Holland 80%

9) Third Party Providers

Please provide the name, address, telephone number, and email address of each of the following outside providers that advise your company on matters relating to operations, business development and disclosure:

Legal Counsel

Name: Ashmit Patel

Firm: Brimstone and Company

Address 1: 1629 K Street N.W. Suite 300

Address 2: Washington D.C. 20006

Phone: (212)318-2406

Email: apatel@brimstoneandcompany.com

Accountant or Auditor

Name: N/A

Firm: N/A

Address 1: N/A

Address 2: N/A

Phone: N/A

Email: N/A

Investor Relations Consultant

Other Advisor: Any other advisor(s) that assisted, advised, prepared or provided information with respect to this disclosure statement.

N/A

10) Issuer Certification

The issuer shall include certifications by the chief executive officer and chief financial officer of the issuer (or any other persons with different titles, but having the same responsibilities).

The certifications shall follow the format below:

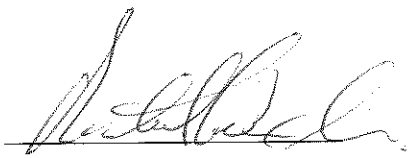
I, Michael Wexler certify that:

1. I have review this Annual Disclosure Statement of VMS Rehab Systems, Inc.

2. Based on my knowledge, this disclosure statement does not contain any untrue statement of a material fact or omit to state a material fact necessary to make the statements made, in light of the circumstances under which such statements were made, not misleading with respect to the period covered by this disclosure statement; and

3. Based on my knowledge, the financial statements, and other financial information included or incorporated by reference in this disclosure statement, fairly present in all material respects the financial condition, results of operations and cash flows of the issuer as of, and for, the periods presented in this disclosure statement.

November 22, 2016]



Michael Wexler

Chairman of the Board/CEO

VMS Rehab Systems, Inc.