Edgar Filing: HOFFMAN MICHAEL JOHN - Form 4/A

HOFFMAN MICHAEL JOHN Form 4/A March 12, 2009						
March 12, 2009 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).						
(Print or Type Responses)						
1. Name and Address of Reporting Person <u>*</u> HOFFMAN MICHAEL JOHN	2. Issuer Name and Ticke Symbol CONSTAR INTERNA [CNST]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) ONE CROWN WAY	(Monul/Day/Tear) below)			e title 10% Owner below) sident and CEO		
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) 07/27/2007 PHILADELPHIA, PA 19154-4599			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City) (State) (Zip)	Table I - Non-Derivat	ive Securities Acc	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. De Execut any (Month	on Date, if Transaction(A) Code (D)	r. 3, 4 and 5) (A) or	SecuritiesIBeneficially(OwnedI	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common 05/31/2007 Stock	F 2,34	\$	148,411 (1)	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivativ Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,	;	Date	Amou Under Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
		Code N	4, and 5) V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
HOFFMAN MICHAEL JOHN ONE CROWN WAY PHILADELPHIA, PA 19154-4599	Х		President and CEO			
Signatures						
/s/David Waksman, Attorney in Fact	03/	/12/2009				

**Signature of Reporting Person

Date

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- This Form 4/A is being filed solely to correct the figure in Column 5. The underlying Form 4 (and subsequent filings on Form 4) (1) overstate column 5 by 578 shares.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.