Edgar Filing: Treshler Joseph Raymond - Form 4

Treshler Jose	ph Raymond										
Form 4											
March 14, 20	018										
FORM	1								OMB AF	PPROVAL	
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section				SECUR	ITIES				Expires: January 2 Extimated average burden hours per response		
obligation may conti <i>See</i> Instru 1(b).	inue. Section 17	(a) of the Pu	iblic Ut		ing Com	pany	Act of	1935 or Section	1		
(Print or Type R	(esponses)										
Treshler Joseph Raymond Sym			ymbol	Name and			2	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle) 3	. Date of	Earliest Tra	insaction			(Check	c all applicable)	
PO BOX 57	19	(1	Month/Da)3/13/20	ay/Year)				X Director Officer (give t below)		Owner er (specify	
				nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CLEARWA	TER, FL 33758							Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3, 4	posed and 5 (A) or	of (D)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Shares	03/13/2018			P	Amount 17,000	(D) A	Price \$ 0.16	17,000	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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivati Securitie Acquiree (A) or Disposed of (D) (Instr. 3,	(Month/Day/Year) vative urities uired or oosed D)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr	
				Code V	4, and 5)		Expiration Date		Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer Other					
Treshler Joseph Raymond PO BOX 5719 CLEARWATER, FL 3375	8	Х							
Signatures									
/s/ Joseph R Treshler	03	/14/2018							
<u>**Signature of</u> 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).

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.