Omega Flex, Inc. Form 4 August 10, 2005

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

January 31, Expires: 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person * **HUNTER DAVID W**

(First)

(State)

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

Omega Flex, Inc. [OFLX]

(Check all applicable)

5TH FLOOR, KOPPERS

(Middle)

(Zip)

3. Date of Earliest Transaction (Month/Day/Year)

X_ Director 10% Owner Officer (give title Other (specify

BUILDING, 436 SEVENTH AVENUE

> (Street) 4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

08/01/2005

X Form filed by One Reporting Person Form filed by More than One Reporting

PITTSBURGH, PA 15219

(City)	(State)	Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of	2. Transaction Date	2A. Deemed	3.		4. Securities Acquired			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution Date, if	Transa	actio	n(A) or Disposed of			Securities	Form: Direct	Indirect	
(Instr. 3)		any	Code		(D)			Beneficially	(D) or	Beneficial	
		(Month/Day/Year)	(Instr.	8)	(Instr. 3, 4 and 5)		Owned	Indirect (I)	Ownership		
							Following	(Instr. 4)	(Instr. 4)		
					Z A N		Reported				
						(A)		Transaction(s)			
			C 1	V	A	or	ъ.	(Instr. 3 and 4)			
			Code	V	Amount	(D)	Price				
common stock	08/01/2005		J(1)	V	13,330	A	\$ 0	13,330	D		
common stock	08/01/2005		J <u>(1)</u>	V	9,500 (2)	A	\$0	9,500	I	spouse	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transacti	5. orNumber	6. Date Exerc Expiration D		7. Title Amount		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)		or Exercise Price of Derivative Security	(Monas Day) Teal)	any (Month/Day/Year)	Code (Instr. 8)	of	(Month/Day/Year) we es d		Underlying Securities (Instr. 3 and 4)	ying ies	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title N	Amount or Number of Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

10% Owner Officer Other Director

HUNTER DAVID W 5TH FLOOR, KOPPERS BUILDING 436 SEVENTH AVENUE PITTSBURGH, PA 15219



Signatures

Timothy P Scanlan, by power of attorney

08/10/2005

**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).
- Pro rata distribution by Mestek, Inc. of all of its common stock of Omega Flex, Inc., which is exempt from Section 16 by 17 CFR **(1)** 240.16a-9. The transaction is being voluntarily reported for informational purposes only.
- The reporting person disclaims beneficial ownership of these securities. This report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16, or for any other purpose.

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.

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