FORM 4	4
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1	Check this box if no	
	longer subject to	
	Section 16. Form 4 or	
	Form 5 obligations	
	may continue. See	
	Instruction 1(b).	1

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

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

OMB APPROVAL OMB 3235-Number: 0287 Estimated average burden hours per 0.5 response...

(9-02)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Find of Type Respon	113(5)											
1. Name and Address MCGLASSON P.							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below)					
(Last) (First) (Middle) 23901 CALABASAS RD STE 2072			3. Date of Earliest Transaction (Month/Day/Year) 11/04/2005						below) Sec	retary		
(Street) CALABASAS, CA 91302			4. If Amendment, Date Original Filed(Month/Day/Year)						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-Dei	rivat	ive Secur	rities A	Acqui	red, Disposed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Exect any	Deemed ution Date, if nth/Day/Year)	3. Transacc Code (Instr. 8 Code	tion	Disposed of (D) (Instr. 3, 4 and 5) (A) or		<b>)</b> )	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	11/03/2005	11/0	3/2005	А		2,500	А	\$0	20,000	D		

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

Persons who respond to the collection of SEC 1474 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

( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6	. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n Nu	umber	a	nd Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(1	Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	De	erivative		Securities (		(Instr. 5)	Beneficially	Derivative	Ownership		
	Derivative					curitie				(Inst	r. 3 and		Owned	Security:	(Instr. 4)
	Security				Ac	cquired	d			4)			U U	Direct (D)	
					(A	) or							Reported	or Indirect	
						ispose	d						Transaction(s)	· /	
						(D)							(Instr. 4)	(Instr. 4)	
						1str. 3,									
					4,	and 5)	)								
											Amount				
							Г	Date	Expiration		or				
								Exercisable	1	Title	Number				
								LACICISADIC	Date		of				
				Code V	(A	A) (D	))				Shares				

## **Reporting Owners**

Bonouting Oppmen Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
MCGLASSON PATTI L W 23901 CALABASAS RD STE 2072 CALABASAS, CA 91302			Secretary					

# Signatures

/s/ Patti L. W. McGlasson	11/04/2005
**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).

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.