Oliva Thom Form 5										
February 14								OMB A	PPROVAL	
Check thi	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					OMB Number: Expires:	3235-0362 January 31,			
						Estimated average burden hours per response 1.				
See Instru 1(b). Form 3 H Reported Form 4 Transactic Reported	Filed purs oldings Section 17(a	auant to Section 1 a) of the Public Ut 30(h) of the In	tility Holdin	g Compa	any A	ct of	1935 or Sectio	n		
1. Name and A Oliva Thom	uer Name <b>and</b> Ticker or Trading ol VEO, INC [CVO]				5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (M		3. Statement for Issuer's Fiscal Year Ended			ed	(Check all applicable)			
ONE CAN GREEN,Â	nth/Day/Year) 31/2006				Director 10% Owner X_Officer (give title Other (specify below) President					
GILLEN, A	nendment, Date Original onth/Day/Year)			6. Individual or Joint/Group Reporting (check applicable line)						
STAMFOR	D, CT 06901						_X_ Form Filed by Form Filed by ∃ Person	One Reporting P More than One R		
(City)	(State) (	Zip) Tabl	e I - Non-Deri	vative Sec	uritie	s Acqu	ired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	â	â	â	Amount	(D)	Price	(Instr. 3 and 4)	<b>D</b> (1)	â	
Stock	Â	Â	Â	Â	Â	Â	429,957	D <u>(1)</u>	Â	
Reminder: Rep	port on a separate line	for each class of	Persons wh	o respon	nd to t	the co	llection of info	rmation	SEC 2270	

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

Persons who respond to the collection of information SE 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)

(9-02)

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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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. of D S B O Ei Is Fi Is (I
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships						
	Director	10% Owner	Officer	Other				
Oliva Thomas ONE CANTERBURY GRE 201 BROAD STREET STAMFORD, CT 0690		Â	Â	President	Â			
Signatures								
/s/ Thomas Oliva	02/12	/2007						
<b>**</b> Signature of	Da	ate						

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).

(1) Includes 613 shares purchased under Issuer's Employee Stock Purchase Plan and 861 shares under Issuer's 401(k).

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.