Lipschutz Lester E Form 3 December 17, 2004

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

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

(Print or Type Responses)

1. Name and Address of Reporting Person * Statement À Lipschutz Lester E

(Last) (First) (Middle)

WOLF, BLOCK, SCHORR AND SOLIS-COHEN LLP, 1650 ARCH STREET, 22ND FLOOR

(Street)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

(Month/Day/Year)

12/15/2004

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

(Check all applicable)

VioOuest Pharmaceuticals [VOPH.OB]

Director _X__ 10% Owner Officer Other (give title below) (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

PHILADELPHIA, Â PAÂ 19103

(City) (State) (Zip)

1. Title of Security (Instr. 4)

Table I - Non-Derivative Securities Beneficially Owned

(Instr. 4)

Beneficially Owned

2. Amount of Securities 3.

Ownership Form:

(I) (Instr. 5) 4. Nature of Indirect Beneficial Ownership

(Instr. 5) Direct (D) or Indirect

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

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security**

5. 4 Conversion Ownership or Exercise Form of Derivative Price of

6. Nature of Indirect Beneficial Ownership (Instr. 5)

(Instr. 4)

Date **Expiration Title** Exercisable Date

Amount or Number of

Security: Derivative Security Direct (D)

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Shares or Indirect

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address $\frac{\text{Relationships}}{\text{Director}} = \frac{10\%}{\text{Owner}} = \frac{10\%}{\text{Owner}} = \frac{10\%}{\text{Other}}$ Utips Chutz Lester E $\frac{10\%}{\text{Owner}} = \frac{10\%}{\text{Owner}} =$

Signatures

Lester E. 12/16/2004 Lipschutz

1650 ARCH STREET, 22ND FLOOR PHILADELPHIA, PAÂ 19103

**Signature of Date
Reporting Person

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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).

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Remarks:

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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