Edgar Filing: Florman David - Form 4

Florman Day	vid										
Form 4	000										
March 17, 20	_									PROVAL	
FORM	14 UNITEI) STATES	S SECUI	RITIES A	ND EX	СНА	NGE C	OMMISSION		THOVAL	
				shington,					Number:	3235-0287	
Check th				0,					Expires:	January 31,	
subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNE				NERSHIP OF	Estimated average		
Section 16.				SECURITIES					burden hours per		
Form 4 c Form 5			a .• 1						response	0.5	
obligatio							•	e Act of 1934,			
may cont	tinue. Section 1			vestment	•	· ·		1935 or Sectior	1		
See Instr 1(b).	uction	50(II)		ivestinent	Compa	Iy At	1 01 194	0			
1(0).											
(Print or Type I	Responses)										
						Reporting Person(s) to					
Florman David Symbol							Issuer				
			OPOLITAN HEALTH /ORKS INC [MDF]			(Check all applicable)					
			NEIW	ORKS IN	C [MDF	J					
(Last)	(First)	(Middle)		f Earliest Ti	ransaction			X_ Director Officer (give t		Owner r (specify	
				onth/Day/Year) /16/2009				below)	below)	r (speen)	
210-27 021ND AVENUE 03/10/2											
			endment, Date Original				6. Individual or Joint/Group Filing(Check				
			nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
HOLLIS HILLS, NY US 11427				Form filed by M				Iore than One Reporting			
								Person			
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Secur	ities Acqu	uired, Disposed of,	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da			3. 4. Securities Acquired				5. Amount of	6.	7. Nature of	
Security (Instr. 3)	(Month/Day/Year	·	n Date, if	Transactio		-		Securities Beneficially	Ownership Form: Direct	Indirect Demoficial	
(Instr. 3) any (Month/Day/Y		Day/Year)	Code (Instr. 3, 4 and 5) y/Year) (Instr. 8)			Owned	(D) or	Ownership			
		× ·	, , , , , , , , , , , , , , , , , , ,	. ,				Following	Indirect (I)	(Instr. 4)	
						(A)		Reported Transaction(s)	(Instr. 4)		
						or	D ·	(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price \$				
Stock	03/16/2009			Р	2,500	А	ф 1.4192	78,216	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)

Edgar Filing: Florman David - Form 4

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addre	SS	Relationships						
	Director	10% Owner	Officer	Other				
Florman David 218-29 82ND AVENUE HOLLIS HILLS, NY US 114	X 27							
Signatures								
/s/ David A. Florman)3/16/2009							
<u>**</u> 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.