

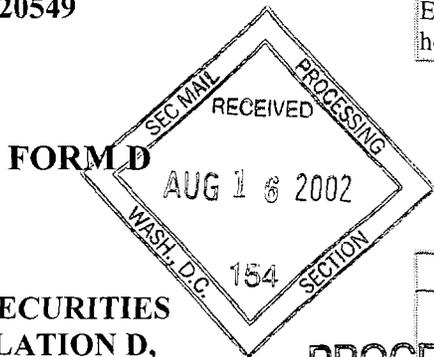
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SEC 1972 Potential persons who are to respond to the collection of information contained in this (6-02) form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden hours per response... 1



FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY		
Prefix		Serial
PROCESSED		
DATE RECEIVED		
AUG 29 2002		

P THOMSON FINANCIAL

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

US\$100,000 Private Placement

Filing Under (Check box(es) that apply):
 Rule 504 Rule 505 Rule 506 Section 4(6) ULOE

Type of Filing: New Filing Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer (check if this is an amendment and name has changed, and indicate change.)

Active Control Technology Inc.

Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Promoter Beneficial Executive Director
Box(es) Owner Officer General and/or
that Managing Partner
Apply:

Full Name (Last name first, if individual)

Barrett, Stephen R.

Business or Residence Address (Number and Street, City, State, Zip Code)

46 Chedoke Avenue, Hamilton, Ontario L8P 4N9

Check Promoter Beneficial Executive Director
Box(es) Owner Officer General
that and/or
Apply: Managing
Partner

Full Name (Last name first, if individual)

Hazel, Richard C.

Business or Residence Address (Number and Street, City, State, Zip Code)

323 Ridley Blvd., Toronto, Ontario M3H 1L2

Check Promoter Beneficial Executive Director General
Box(es) Owner Officer and/or
that Managing
Apply: Partner

Full Name (Last name first, if individual)

Atlas, George

Business or Residence Address (Number and Street, City, State, Zip Code)

605 Vesta Drive, Toronto, Ontario M5N 1J2

Check Promoter Beneficial Executive Director General
Box(es) Owner Officer and/or
that Managing
Apply: Partner

Full Name (Last name first, if individual)

Cohen, Richard

Business or Residence Address (Number and Street, City, State, Zip Code)

103 Clark Avenue, Thornhill, Ontario L3T 1T1

Check Promoter Beneficial Executive Director General
Box(es) Owner Officer and/or
that Managing
Apply: Partner

Full Name (Last name first, if individual)

Walton, Richard J.

Business or Residence Address (Number and Street, City, State, Zip Code)

1690 John Street, Thornhill, Ontario L3P 1Y9

Check Promoter Beneficial Executive Director General
Box(es) Owner Officer and/or
that Managing
Apply: Partner

Full Name (Last name first, if individual)

Duat Investments Inc.

Business or Residence Address (Number and Street, City, State, Zip Code)

Check [] Promoter [] Beneficial [] Executive [] Director [] General
Box(es) Owner Officer and/or
that Managing
Apply: Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING

1. Has the issuer sold, or does the issuer intend to sell, to non- Yes No
accredited investors in this offering?..... [] [✓]

Answer also in Appendix, Column 2, if filing under ULOE.

2. What is the minimum investment that will be accepted from any individual?..... \$US160,000

3. Does the offering permit joint ownership of a single Yes No
unit?..... [] [✓]

4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) [] All States

- [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) [] All States

- [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]
- [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]
- [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]
- [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) [] All States

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- [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]
- [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]
- [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ _____	\$ _____
.....		
Equity ...Common Shares + Warrants.....	\$ <u>100,000</u>	\$ <u>100,000</u>
[√] Common [] Preferred		
Convertible Securities (including warrants)	\$ _____	\$ _____
.....		
Partnership Interests	\$ _____	\$ _____
.....		
Other (Specify _____).	\$ _____	\$ _____

Total

\$ 100,000 \$ 100,000

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	<u>1</u>	\$ <u>100,000</u>
Non-accredited Investors	<u>0</u>	\$ <u>0</u>
Total (for filings under Rule 504 only)	<u>1</u>	\$ <u>100,000</u>

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$ _____
Regulation A		\$ _____
Rule 504		\$ _____
Total		\$ _____

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees

\$ _____

..... Printing and Engraving Costs	[] \$ _____
..... Legal Fees	[] \$ <u>2,500</u>
..... Accounting Fees	[] \$ _____
..... Engineering Fees	[] \$ _____
..... Sales Commissions (specify finders' fees separately)	[] \$ _____
..... Other Expenses (identify) <u>Finder's</u> Fee _____	[] \$ <u>5,000</u>
..... Total	[] \$ <u>7,500</u>

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." \$ 92,500

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments & To Others
Salaries and fees	[] \$ _____	[] \$ _____
..... Purchase of real estate	[] \$ _____	[] \$ _____
..... Purchase, rental or leasing and installation of machinery and equipment	[] \$ _____	[] \$ _____
..... Construction or leasing of plant buildings and facilities.....	[] \$ _____	[] \$ _____
..... Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[] \$ _____	[] \$ _____
..... Repayment of indebtedness	[]	[]

.....	\$ _____	\$ _____
Working capital	[]	[]
.....	\$ _____	\$ _____
Other (specify): <u>Research and Development and</u>	[]	[]
<u>Marketing</u>	\$ _____	\$92,500
<u>Expenses</u>	[]	[]
.....	\$ _____	\$ _____
.....	[]	[]
Column Totals	\$ _____	\$92,500
Total Payments Listed (column totals added)		[] \$92,500
.....		

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
ACTIVE CONTROL TECHNOLOGY INC.		Aug 15/02
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
STEPHEN BARRETT	DIRECTOR	

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

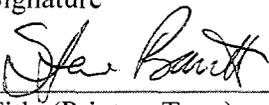
E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? Yes No
..... [] [x]

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
ACTIVE CONTROL TECHNOLOGY INC.		Aug 15/02
Name of Signer (Print or Type)	Title (Print or Type)	
STEPHEN BARRETT	DIRECTOR	

Instruction:

MN									
MS									
MO									
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
OH									
OK									
OR									
PA	√	Units \$100,000	1	100,000	0	0			√
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									
WY									
PR									