FORM D

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

PROCESSED
JUL 3 1 2003
IHOMOSON

FORM D

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

112,4673	
	OMB APPROVAL
	MB Number: 3235-0076 : May 31, 2005 ed average burden vr response 1.00
03027552	SEC USE ONLY Lefix Serial
	refix Serial
TION	DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)							
Ordinary Shares							
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☐ ULOE	_						
ype of Filing:	_						
A. BASIC IDENTIFICATION DATA	_						
. Enter the information requested about the issuer	-						
Name of Issuer (Check if this is an amendment and name has changed, and indicate change.)							
Ferraris Group PLC							
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)	_						
Concorde House, Trinity Park, Solihull, West Midlands B37 7ES, UK 011-44-121-782-6000							
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)							
if different from Executive Offices)							
Brief Description of Business Medical diagnostic products and services and life science components							
ype of Business Organization							
☑ corporation ☐ limited partnership, already formed ☐ other (please specify):							
business trust limited partnership, to be formed							
Month Year							
Actual or Estimated Date of Incorporation or Organization: 0 3 5 4 Actual Estimated							
urisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service							
bbreviation for State; CN for Canada; FN for other foreign jurisdiction) F N							

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in 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 to the notice constitutes a part of this notice and must be completed.

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.

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 control number.

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; *The issuer is publicly held.

 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 Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual) Blessington, Bruce A.
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bonostics, Inc., 7 Jackson Road, Devens, MA 01432
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) Dighe, Ian Robert
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ferraris Group PLC, Concorde House, Trinity Park, Solihull, West Midlands B37 7ES, UK
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual) Dighton, Simon Gerald
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ferraris Group PLC, Concorde House, Trinity Park, Solihull, West Midlands B37 7ES, UK
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last Name first, if individual) Fay, Authony William
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ferraris Group PLC, Concorde House, Trinity Park, Solihull, West Midlands B37 7ES, UK
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Mills, Steven Geoffrey
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ferraris Group PLC, Concorde House, Trinity Park, Solihull, West Midlands B37 7ES, UK
Check Box(es) that Apply:
Full Name (Last Name first, if individual) Möller, Gerald
Business or Residence Address. (Number and Street, City, State, Zip Code) c/o Ferraris Group PLC, Concorde House, Trinity Park, Solihull, West Midlands B37 7ES, UK
Check Box(es) that Apply: \square Promoter \square Beneficial Owner \square Executive Officer \boxtimes Director \square General and/or Managing Partner
Full Name (Last Name first, if individual) North, Jonathan
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.)

c/o Ferraris Group PLC, Concorde House, Trinity Park, Solihull, West Midlands B37 7ES, UK

					B. INF	ORMAT	ION ABO	UT OFF	ERING					
	-												Yes	No
1.	Has the iss	uer sold, o								ring?	•••••			
2	What is th	. mainima				lix, Colum		-					¢	N/A
2.	What is th	e mmmmu	iii iiivestiii	ent mat w	iii be acce	pieu nom	any marvi	uuai:	******************			•••••	\$ Yes	No No
3.	Does the c	ffering pe	rmit joint	ownership	of a singl	e unit?					•••••			
4	Enter the	informatic	n raquaete	ad for and	h narcan i	vho hac h	aan or wil	l he poid	or given	directly o	r indirectl	v 00v		
4.	commission		-		•			-	-	•			N/A	7 .00
	offering.	f a person	to be liste	ed is an as	sociated p	erson or ag	gent of a bi	roker or d	ealer regis	stered with	the SEC	and/or		OT CABLE
	with a stat										d are asso	ciated		···
	persons of	Such a bro	oker or de	alei, you ii	nay set for	in the into	imation ic	or that bro	kei or dea	iei omy.				
Full N	ame (Last r	ame first,	if individ	ual)										
Busin	ess or Resid	ence Add	ress (Num	ber and St	reet, City,	State, Zip	Code)			<u>.</u>				
Name	of Associat	ed Broker	or Dealer									·	-	
States	in Which P	ercon Lict	ed Has So	licited or	Intends to	Solicit Pur	rchasers		 					
	ck "All Stat							, .					□ All Sta	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[lD]		
[IL] [MT]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD] [NC]	[MA] [ND]	[MI]	[MN]	[MS]	[MO]		
[RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[VA]	[WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full N	lame (Last 1	name first.	if individ	ual)		· · · · ·	·				·	 _		
Busin	ess or Resid	lence Add	ress (Num	ber and St	reet, City,	State, Zip	Code)							
Name	of Associa	ed Broker	or Dealer					-					···	
States	in Which F	erson List	ted Has So	licited or	Intends to	Solicit Pu	rchasers							
	ck "All Sta												□ All St	ates
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[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 N	lame (Last	name first	, if individ	ual)									 ,	
Busin	ess or Resid	lence Add	ress (Num	ber and S	treet, City	, State, Zip	Code)							
Name	of Associa	ted Broke	r or Dealer											
	in Which I					Solicit Pu	rchasers	 _						
(Che	ck "All Sta [AK]		eck individ [AR]) [CO]	[CT]	ושבוו	וחרי	יובתן		 (HTI		□ AJI S	tates
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[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

Type of Security	Aggree Offering	gate	Amoi	unt Already Sold
Debt	\$	_	6	
			э	
* Equity (Ordinary Shares) □ Common □ Preferred	\$10,	183,540	\$	10,183,540
Convertible Securities (including warrants)	\$	-0-	\$	-0-
Partnership Interests	\$		\$	-0-
Other (Specify)	\$			-0-
Total	\$ 10,			
* Based on the exchange rate in effect on July 9, 2003.				
2. Enter the number of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicathe number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	te ir		Aggr	egate Dolla
	Numbe Invest		Aı	mount of urchases
Accredited Investors		1	\$	10,183,540
Non-Accredited Investors		-0-	\$	-0-
Total (for filings under Rule 504 only)		N/A	\$	N/A
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, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C Question 1.		OT APPI	JCABL	E
Type of Offering	Type of S	ecurity	Doll	lar Amount Sold
		-	\$	
Rule 505			· -	
Rule 505 Regulation A			\$	
Regulation A			\$	
			\$ \$ \$	
Regulation A	r.		\$ \$ \$	
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 issue. The information may be given as subject to future contingencies. If the amount of an expenditure	r.	\$	\$ \$	315,000

b.	and total expenses furnished in respor	egate offering price given in response to Part C - Quest use to Part C Question 4.a. This difference is the "ad	justed	·\$_	9	,368,540	<u>)</u>
5.	each of the purposes shown. If the ar	usted gross proceeds to the issuer used or proposed to mount for any purpose is not known, furnish an estima. The total of the payments listed must equal the account to Part C Question 4.b above.	te and	check			
				Payments to Officers, Director & Affiliates	s		yments to Others
	Salaries and fees			\$		\$	
	Purchase of real estate			\$		\$	
	Purchase, rental or leasing and install	ation of machinery and equipment		\$		\$	
	Construction or leasing of plant build	lings and facilities		\$		\$	
	•	ing the value of securities involved in this offering that ts or securities of another issuer pursuant to a merger)		\$	X	\$	9,368,540
	Repayment of indebtedness			\$		\$	
	Working capital			\$		\$	
	Other (specify):			\$		\$	
	Column Totals			\$	×	\$	9,368,540
	Total Payments Listed (column totals	s added)		☒ \$	9,368	<u>,540</u>	
				·			
_		D. FEDERAL SIGNATURE					
si	mature constitutes an undertaking by t	be signed by the undersigned duly authorized person. he issuer to furnish to the U.S. Securities and Exchang y non-accredited investor pursuant to paragraph (b)(2)	e Com	mission, upon writte			
[i	ssuer (Print or Type)	Signature	Date				
]	Ferraris Group PLC	500		July 3	22,	2003	3
	Name of Signer (Print or Type)	Title of Signer (Print or Type)					
	Simon G. Dighton	Group Finance Director					ł

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