FORM D

Name of Offering

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

FORM D



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

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

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OMB	APPR	OVAL			
OMB Num	ber:	323	5-0076		
Expires: Estimated		30,2	800		
Estimated	averag	e burd	en		
hours per response 16.00					

	SEC USE ONLY				
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Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section - Type of Filing: New Filing Amendment	4(6) ULABON RECEIVED
Type of Filing: Mew Filing Amendment	APP
A. BASIC IDENTIFICATION DATA	24 2007
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Stretta Inc.	186 <u>scitor</u>
Address of Executive Offices (Number and Street, City, State, Zip Cod	e) Telephone Number (Including Area Code)
4235 W. Marginal Way SW Seattle WA 98106	206 938-1064
Address of Principal Business Operations (Number and Street, City, State, Zip Coc (if different from Executive Offices)	de) Telephone Number (Including Area Code)
Brief Description of Business Stretta Inc. is developing a line of telescopic poles with multiple head assemblies. The hone pole that can accommodate each of the various attachments. Stretta will manage manage management	
Type of Business Organization	FRUUEDJED
	er (please specify):
business trust limited partnership, to be formed	MAY 0 9 2007
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for S	Estimated State: THOMSON
CN for Canada; FN for other foreign jurisdiction)	WA FINANCIAL

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.

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.

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 predictated on the filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA		
2. Enter the information re	quested for the fol	llowing:			
 Each promoter of t 	he issuer, if the iss	suer has been organized w	vithin the past five years;		
 Each beneficial ow 	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issue
 Each executive off 	icer and director o	f corporate issuers and of	corporate general and mai	naging partners of	partnership issuers; and
Each general and n	nanaging partner o	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Check Box(es) that Apply.	D Tromoter	Benericiai Owner	Executive officer		Managing Partner
Full Name (Last name first, i Troudt Kevin	f individual)				
Business or Residence Addre 12630 Etris Rd, Roswell,		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Molenda Andrew	f individual)				
Business or Residence Addre 1332 42nd Ave. SW See		•	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	. 			
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	· · ·			
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
	(Use bla	ink sheet, or copy and use	additional copies of this s	sheet, as necessary)	· · · · · · · · · · · · · · · · · · ·

				B. I	NFORMAT	TON ABOU	T OFFERI	NG				
1. Has th	e issuer sol	d, or does t	he issuer i	ntend to se	ll, to non-a	ecredited i	investors is	this offer	ing?		Yes	No
	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.						<u> </u>					
2. What i							s_49,	700.00				
											Yes	No
	_			-	_							
commi If a per or state	ssion or sin son to be lises, list the n	nilar remune sted is an as	eration for s sociated po proker or d	solicitation erson or age ealer. If m	n of purchas ent of a brol ore than fiv	ers in conn ker or deale e (5) perso	ection with or registere ns to be list	sales of se d with the S ed are asso	curities in t SEC and/or	lirectly, any the offering. with a state sons of such		
Full Name	(Last name	first, if ind	lividual)									
Business or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Lip Code)						
Name of As	ssociated B	roker or De	aler									
States in W	hich Person	n Listed Ha	s Solicited	or Intends	s to Solicit	Purchasers	;			· · · · · · · · · · · · · · · · · · ·		
(Check	"All State	s" or check	individua	l States)				***********			☐ AI	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	Н	[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	ŢΝ	[TX]	UT	VT	VA	WA	WV	WI	WY.	PR
Full Name	Full Name (Last name first, if individual)											
Business o	r Residence	Address (Number an	d Street, C	City, State,	Zip Code)		·				
Name of As	sociated B	roker or De	aler								_	
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		<u> </u>				
(Check	"All State	s" or check	individual	States)				***************************************			☐ Al	l States
AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	нп	[ID]
	IN	IA	KS	KŸ	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 ind	ividual)									
Business o	r Residence	Address (Number an	d Street, C	City, State,	Zip Code)						
Name of As	sociated B	roker or De	aler									
States in W	hich Percor	listed Un	e Solicited	or Intends	to Solicie	Durokosass		<u>-</u> .				
		s" or check						••••••	••••		☐ Al	l States
AL	AK	AZ	[AR]	CA	CO	ČT	DE	DC	FL	GA	HI	ĪĎ
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 the 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	S	S
	Equity		\$ 100,000.00
	Convertible Securities (including warrants)		s
	Partnership Interests		
	Other (Specify)		
	Total		
	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."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$_100,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	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, 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.		
	T	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
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 insurer. 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		\$ 2,000.00
	Legal Fees		\$_1,106.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	-	§ 62,125.00
	Other Expenses (identify)		\$
	m. 1		65 231 00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	ENSES AND USE OF PROCEEDS	·
	b. Enter the difference between the aggregate offering price given in response to and total expenses furnished in response to Part C — Question 4.a. This difference proceeds to the issuer."	e is the "adjusted gross	\$556,019.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or preach of the purposes shown. If the amount for any purpose is not known, further the box to the left of the estimate. The total of the payments listed must exproceeds to the issuer set forth in response to Part C — Question 4.b above.	rnish an estimate and	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		№ \$ 72,000.00
	Purchase of real estate		
	Purchase, rental or leasing and installation of machinery		 •
	and equipment		
	Construction or leasing of plant buildings and facilities	_	_ ⊔ง
	Acquisition of other businesses (including the value of securities involved in 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): patents, product development, tooling charges,		\$ 424,319.00
	Column Totals		_ <u>\$ 556,019.00</u>
	Total Payments Listed (column totals added)		556,019.00
Г	D. FEDERAL SIGNAT	URE	
sig	the issuer has duly caused this notice to be signed by the undersigned duly authorize spature constitutes an undertaking by the issuer to furnish to the U.S. Securities are information furnished by the issuer to any non-accredited investor pursuant to	nd Exchange Commission, upon writ	
Iss	suer (Print or Type) Signature	Date	
St	tretta Inc.	gde 4-10-0	7
Na	me of Signer (Print or Type) Title of Signer (Print or T		· · · · · · · · · · · · · · · · · · ·
1	ANDREW MOLENDA SECRETARI	1	
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- ATTENTION -

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

		E. STATE SIGNATURE					
1.		262 presently subject to any of the disqualification	Yes No				
		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.						
	er has read this notification and knows the thorized person.	e contents to be true and has duly caused this notice to l	oe signed on its behalf by the undersigned				
Issuer (Print or Type)	Signature	Date				
Stretta	Inc.	allastrule	4-10-07				
Name (Print or Type)	Title (Print or Type)					
AN	DREW MOLENDA	SECRETARY					

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

