

## 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

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:						
Estimated average burden						
hours per response 16.00 SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						

AQUATHIRST, INC.	is is an amendment and name has	s changed, and indica	ite change.)	_	1	
Filing Under (Check box(es) that	apply): [] Rule 504	[ ] Rule 505	[ x ] Rule 506	[ ] Section (4(6)	🖊 🕽 ULOI	<b>Ξ</b>
Type of Filing: (>> ) New Filing	Amendment			SEC. " RECEIV		
***************************************	A. BA	SIC IDENTIFICATION	ON DATA	\\\\ APR o	20 K	***************************************
Enter the information requests	d about the issuer			APR 24 2	2007	
Name of Issuer ([ ] check if this AQUATHIRST, INC.	is an amendment and name has c	changed, and indicate	e change.)	186 SECT	TON	1
Address of Executive Offices	(Number and Street, City, State, 2	Zip Code)	Telephor	ne Number (Including	Area Code)	
8726 So. Sepulveda Blv	d, Suite D-266 Los Angele	s, California 900	)45	1-310-924-9812	?	
Address of Principal Business C (if different from Executive Office	perations (Number and Street, Cit s)	ty, State, Zip Code)	Telephor	ne Number (Including A	Area Code)	
Brief Description of Business Manufacturing and Distrib	oution of Functional Water a	and Health Produ	ıcts			
Type of Business Organization					DDC	norcet!
[x] corporation	[ ] limited partnership,	already formed	ĺ	) other (please specify	): PRC	)CESSE
[ ] business trust	[ ] limited partnership,	to be formed				0.0007
	Mon		1	1 (1		AY <b>0 9</b> 2007
	rporation or Organization: [ 0 ][		•	Actual [ ] Estima	ited	
Jurisdiction of Incorporation or C	rganization: (Enter two-letter U.S. I CN for Canada; FN fo			] [E ]	V	THOMSON FINANCIAL
GENERAL INSTRUCTIONS			***************************************	•••••••••••••		***************************************
Federal:						
15 U.S.C. 77d(6). When to File: A notice must be file and Exchange Commission (SEI date on which it is due, on the date of the commission of		first sale of securities eived by the SEC at egistered or certified h Street, N.W., Wasie SEC, one of which gnatures.	s in the offering. the address give mail to that addr hington, D.C. 20 must be manua need only report	A notice is deemed file in below or, if received ress. 1549. Ily signed. Any copies it the name of the issue	ed with the U. at that addre not manually or and offering	S. Securities ess after the signed must

## 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.

## **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 state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02) 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: 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 [x] Beneficial Owner [x] Executive Officer [x] Director [] General and/or Full Name (Last name first, if individual) Stephen Barrie Business or Residence Address (Number and Street, City, State, Zip Code) 8726 So. Sepulveda Blvd, Suite D-266 Los Angeles, California 90045 Check Box(es) that Apply: [ ] Promoter [ x ] Beneficial Owner [ ] Executive Officer [ x] Director [ ] General and/or Full Name (Last name first, if individual) Don Gallego 8726 So. Sepulveda Blvd, Suite D-266 Los Angeles, California 90045 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [ ] Promoter [ x ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner Full Name (Last name first, if individual) Stephen Perry 8726 So. Sepulveda Blvd, Suite D-266 Los Angeles, California 90045 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing 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.)

~~~~	************	~~~		~~~~ <del>~~~~~~~~</del>	**********	B. INFOR	MATION A	BOUT OF	ERING		***************************************	·····	
1. Has	the issuer	sold, or do	es the iss	uer intend	to sell, to r	non-accred	lited investo	ors in this o	ffering?		Yes [ ]	No [×]	
				Answei	also in Ap	pendix, Co	olumn 2, if 1	filing under	ULOE.				
2. Wha	it is the mi	nimum inv	estment th	at will be a	ccepted fr	om any inc	lividual?				\$_50,0	000	
3. Does	s the offeri	ng permit j	oint owner	rship of a s	single unit?						Yes (x)	No [ ]	
commis offering and/or	ssion or si y. If a pers with a stat	milar remu on to be lis e or states	neration fo sted is an a , list the na	or solicitation associated ame of the	on of purch person or broker or o	nasers in co agent of a dealer. If m	onnection v broker or d ore than fiv	vith sales o lealer regist ve (5) perso	rectly or indi f securities i ered with the ns to be liste ker or deale	n the e SEC ed are	NA	, ,	
Full Na	me (Last r	name first,	if individua	ai)									
Busine	ss or Resi	dence Ado			Street, City,			***************************************	•••••	4 <del>4</del>	***************************************		**********
	of Associa					*********************	***********					***************************************	222222222240
States	in Which F	Person Lis		olicited or l	Intends to					[	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]	[XT]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
	me (Last r	name first,	if individua	al)				.,					
Busine	ss or Resi	dence Add	fress (Nun	nber and S	treet, City,	State, Zip	Code)						****************
Name (	of Associa	ted Broker	or Dealer					***************************************		************	***************************************		*************
					Intends to					***************************************			
(Check	"All States'	' or check i	ndividual S	tates)	•••••					ſ	] All States		
[AL]	[AK]	[AZ]	[AR]	[CA]		[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]	
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
(MT) (RI)	[NE]	[NV]	[NH] [TN]	[NJ]	(NM)	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA] [PR]	
	[SC]	[SD]		[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]		*************
												*******	
			,		street, City,		•	***************	**************	***********	***************		
Name o	of Associat	ted Broker	or Dealer					•••••	***************************************				
			ted Has So ndividual S		ntends to S	Solicit Purd	hasers			ſ	All States		
(AL)	[AK]	[AZ]	(AR)	[CA]	[CO]	[CT]	[DE]	(DC)	(FL)	[GA]	(HI)	[ID]	
	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	(, _) [MI]	[MN]	[MS]	[MO]	
[IL]						-	1				- 4		
(IL) (MT)	[NE]	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	(ND)	[OH]	[OK]	[OR]	[PA]	

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

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	NSES AND USE OF PI	ROCEEDS			
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 \( \square\$\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	\$6,000,000 in an initial tranche of \$3,000,000 with option to purchase additional \$3,000,000				
the securities offered for exchange and already exchanged.	A	Amount Already			
Type of Security	Aggregate Offering Price	Amount Aiready Sold			
Debt	\$	\$ 0_			
Equity6,000,000 shares at \$1.00 per share ,3,000,000 initial tranche, 3,000,000	•	*			
per option to purchase.	\$0	\$			
[x]Common []Preferred	\$6,000,000				
Convertible Securities (including warrants)	\$	\$			
Partnership Interests	\$	\$			
Other (Specify).	\$	\$			
Total	\$6,000,000	<b>\$</b> 0			
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 <u>Rule 504</u> , 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 Dollar Amount			
	Number Investors	of Purchases			
Accredited Investors	0	\$o			
Non-accredited Investors		\$0			
Total (for filings under Rule 504 only)		<u> </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 N/A	Type of Security	Dollar Amount Sold			
Rule 505		\$01u			
Regulation A		•			
Rule 504		\$ \$			
Total		<u>*</u>			
, (1)		Ψ			
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	XJ	] \$2.000			
Printing and Engraving Costs	[]	\$			
Legal Fees	[x]	\$50,000			
Accounting Fees	[]	\$30,000			
Engineering Fees	[1	\$			
Sales Commissions (specify finders' fees separately)	[]	\$			
Other Expenses (identify)	[]	\$			
Total	{x]	\$_92,000			

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." .............

\$5,908,000

