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FORM D

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

FORM D

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

14523	53/_
OMB APPRO	VAL
OMB Number:	3235-0076
Expires:	;
Estimated average	burden
hours per response	16.00



Name of Offering (check if this is an amendment and name has changed, and BIOFUEL ADVANCED RESEARCH & DEVELOPME	indicate change.) ENT (BARD)	LLC REGULATION DOFFERING
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule Type of Filing: New Filing Amendment		
A. BASIC IDENTIFICA	ATION DATA	
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and name has changed, and inc		_
BIOFUEL ADVANCED RESEARCH & DEVE	LOPMENT CI	BARD) LLG
Address of Executive Offices (Number and Street, C	ity, State, Zip Code)	Telephone Number (Including Area Code)
1167 BRIDGE ST. PHILA PA 1912		2 <i>15-</i> 82 <i>5-</i> 8 <i>59</i> 3
Address of Principal Business Operations (Number and Street, 6) (if different from Executive Offices)	City, State, Zip Code)	PROCESSED
Brief Description of Business		DEC 24 2003
MANUFACTURING BIODIESEL FUEL		THOMSON REULFAS
Type of Business Organization		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
corporation limited partnership, already formed	<u>u</u>	ase specify):
business trust limited partnership, to be formed	LIMITED LI	ABILITY COMPANY
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: Incorporation of Organization: (Enter two-letter U.S. Postal Service CN for Canada; FN for other fore)		red
CN for Canada, FN for other force	ign jurisdiction)	

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 predictated on the filing of a federal notice.

A. BASIC ID	ENTIFICATION DATA		
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized w Each beneficial owner having the power to vote or dispose, or di Each executive officer and director of corporate issuers and of Each general and managing partner of partnership issuers. 	rect the vote or disposition		·
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
KHANNA SURALIET	****		
Business or Residence Address (Number and Street, City, State, Zip Co			
1167 BRIDGE St. Phila.			
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 Co	ada)		· · · · · · · · · · · · · · · · · · ·
1167 BRIDGE St. Phila	1 PA 1912	1	
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
KHANNA SOHINII Business or Residence Address (Number and Street, City, State, Zip Co			
Business or Residence Address (Number and Street, City, State, Zip Co	ode)	a in i	
1167 BRIDGE 5+ Phil	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Bobb Howard Business or Residence Address (Number and Street, City, State, Zip Co			
Business or Residence Address (Number and Street, City, State. Zip Co. 1167 BRIDGE 54. Ph.	ode) 1/A PA 19	124	
Check Box(es) that Apply: Reneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) MILLER SHARON			
Business or Residence Address (Number and Street, City, State. Zip C	ode) D	2121	
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or
Check Box(es) that Apply: Promoter Beneficial Owner	Executive (mice)		Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (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, if individual)			

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

					B. 13	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer solo	d, or does ti	ne issuer ir	ntend to se	II, to non-a	ccredited i	nvestors in	this offeri	ing?	,,.	Yes X	No
	Answer also in Appendix, Column 2, if filing under ULOE.										Δ D		
2.	2. What is the minimum investment that will be accepted from any individual?								1000 co				
3.	Does th	e offering	permit join	t ownershi	p of a sing	le unit?			***************************************			Yes	No ⊠
4.	f a persor state	ssion or sim son to be lis s, list the na	tion request illar remune sted is an ass ame of the b you may s	ration for s sociated pe roker or de	solicitation rson or ago aler. If mo	of purchase ent of a brok ore than five	ers in conne (er or deale e (5) persor	ection with r registered is to be list	sales of sec i with the S ed are asso	curities in t SEC and/or	he offering. with a state	:	,
	٨	ما ا	first, if ind										
Bus	siness or	Residence	Address (N	lumber and	Street, Ci	ity, State, Z	Cip Code)				,_ , , , , , , , , , , , , , , , , , ,		
Nar	me of As	sociated Bi	roker or De	aler									
Sta	tes in WI	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)							٦ Al	1 States
	AL IL MT RI	IN NE SC	IA NV SID	AR) KS NII TN	KY NJ TX	LA NM UT	ME NY VT	MD NC VA	MA ND WA	MI OII WV	GA MN OK WI	MS OR WY	MO PA PR
			first, if ind		J/A								
Bus	siness of	Residence	Address (1	Number an	d Street, C	lity, State, 2	Zip Code)						
Nai	me of As	sociated Bi	oker or De	aler									
Sta	tes in W	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers			-			
	(Check	"All States	s" or check	individual	States)			•••••		***************************************		<u> </u>	1 States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	KS NII TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)	1/4								
Bus	siness or	Residence	Address (!	Number an	d Street, C	City, State,	Zip Code)						
Nai	me of As	sociated Bi	roker or De	aler									
Sta	tes in Wi	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)							☐ AI	1 States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

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.		
		Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt		
	Equity	s 10,000,000	\$ 25,000
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	§_0.00	\$_0.00
	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."	11/0	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	600	\$00
	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.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	000	<u>\$_0.00</u>
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		\$ 0.00
	Printing and Engraving Costs		\$ 500.00
	Legal Fees		\$ 2,000.00
	Accounting Fees		\$ 1,000.00
	Engineering Fees		\$-000.00
	Sales Commissions (specify finders` fees separately)		\$ 0.00
	Other Expenses (identify)		\$ 0.00
	Total	_	s-0.00 3,500 0

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	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."		s
5.	Indicate below the amount of the adjusted gross proceed 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 of Officers, Directors, Affiliates	& Payments to Others
	Salaries and fees] \$	\$
	Purchase of real estate	gs <u>3.75 r</u>	41L [\$
	Purchase, rental or leasing and installation of machinery and equipment	s 3.00 p	11L [s
	Construction or leasing of plant buildings and facilities	gs <u>2.00 1</u>	114 🗆 \$
	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] S	[_\$
	Working capital		
	Other (specify): CORPORATE EXPENSES, PERMITS 5	s 1.251	MIL \$
	SUBCONTRACTORS, LEGAL,		
	·	٦s	
	Column Totals	S. 400 M I	<u> </u>
	Total Payments Listed (column totals added)		10 MIL
	D. FEDERAL SIGNATURE		
sig the Iss	SIDEURI ADVANCED RESEARCH of Surejet & Came	sion, upon w ule 502.	ritten request of its staff,
	ime of Signer (Print or Type) Title of Signer (Print or Type)	2	
_	Title of Signer (Print or Type) SURALIET KHANNA BOARD PRESIDENT-C	HAIRMI	9N

— 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 ⊠						
	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.
- 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) BIOFUEL ADVANCED RESEARCH & DEVELOPMENT (BARD) LLC	Signature Date 11/24/08
Name (Print or Type)	Title (Print or Type)
SURAJIET KHANNA	BOARD PRESIDENT - CHAIRMAN

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.

APPENDIX ı 2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price to non-accredited Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors **Investors** Yes No Amount **Amount** AL AKAZAR CACO CTDE DC FL $\mathsf{G}\mathsf{A}$ Н ID IL 75,000 3 IN IA KS ΚY LA ME MD MA ΜI MN MS

APPENDIX 2 1 3 5 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Yes No Investors **Investors** Amount Amount MO MT NE NV NH NJ NM NY జ 25,00 NC ND OH OK OR 75,0000 3 PΑ RI SC SD TN TX UT VTVA WAWV WI

				APP	ENDIX					
1	1 2 3 4							5 Disqualification		
	to non-a	d to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)		amount purchased in State			ate ULOE, attach attion of granted)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										

