#### Edgar Filing: MacLaren Steven - Form 4

MacLaren Steven Form 4	1										
May 22, 2012											
FORM 4			<b>CE CU</b>						PPROVAL		
	UNITED	STATES		RITIES A shington			COMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction	Section 1 Public U	NGES IN SECUI 16(a) of th Itility Hol nvestment	RITIES ne Securit ding Con	Estimated burden hou response	irs per						
1(b).					I	5					
(Print or Type Respon	nses)										
1. Name and Address of Reporting Person <u>*</u> MacLaren Steven			Symbol	er Name <b>an</b> E MEDIC		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (I	Middle)	3. Date of	of Earliest T	ransaction		(Check an applicable)				
5115 ULMERTON RD.			(Month/Day/Year) 03/27/2012				Director 10% Owner Officer (give titleX Other (specify below) former director				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
CLEARWATER	R, FL 33760						Person	More than One R	eporting		
(City) (	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	lly Owned		
	ansaction Date hth/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	Code		(A) or of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report on	a separate line	e for each els	ass of sec	urities bene	ficially own	ned directly of	or indirectly				
Actinition. Report of	a separate find				Person inform require	ns who rest ation cont ed to respo ys a curre	spond to the collect ained in this form ond unless the for ntly valid OMB co	are not m	SEC 1474 (9-02)		

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	ionNumber	Expiration Date	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/Year)	Underlying	Security	Secu

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr.	8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Securities (Instr. 3 and 4)		(Instr. 5)	Bene Owne Follo Repo Trans (Instr		
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
MacLaren Steven 5115 ULMERTON RD. CLEARWATER, FL 33760				former director				
Signatures								

### Jigi

s/ Steven 05/22/2012 MacLaren

<u>\*\*</u>Signature of Reporting Person

Date

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. 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 number.