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SIGN MEDIA SYSTEMS INC Form 3 January 31, 2007 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Asher Phillip			2. Date of Event Requiring Statement(Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol SIGN MEDIA SYSTEMS INC [SGNM]						
(Last)	(First)	(Middle)	01/12/2007		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)			
225 DORIS	DRIVE									
(Street) LAKELAND, FL 33813			Di Of		(Check all applicable)		6. Individual or Joint/Group			
					Director Officer (give title below	officerOther		Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)		Table I - N	lon-Derivat	ive Securiti	ties Beneficially Owned			
1.Title of Secur (Instr. 4)	rity			2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr	*		
Common Stock, No Par Value				2,000,000		Ι	Owner/Manager of Henry Plantagenet, LLC			
Reminder: Repowned directly	-		ich class of secu	rities benefici	ally S	EC 1473 (7-02	.)			
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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial Ownership
	(Month/Day/Year)	Derivative Security (Instr. 4) Title	or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D)	(Instr. 5)

January 31,

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director 10% Own		Officer	Other	
Asher Phillip 225 DORIS DRIVE LAKELAND, FL 33813	Â	ÂX	Â	Â	
Signatures					
Phillip Asher 01/3	31/2007				
<u>**</u> Signature of Reporting Person	Date				

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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.