Edgar Filing: LENAZ LUIGI MD - Form 4/A

LENAZ LUI	GI MD											
Form 4/A												
June 20, 200												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
	UIIIL	D STATES		hington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check this box if no longer									Expires:	January 31, 2005		
subject to STATEMENT OF CHANGES IN					CS IN BENEFICIAL OWNERSHIP OF ECURITIES					Estimated average burden hours per		
Form 4 or Form 5			Castion 1	(a) = f + b	C		1.		response 0.5			
obligation may cont	ns Section 1							ge Act of 1934, f 1935 or Sectio	n			
See Instru		30(h)	of the In	vestment	Company	/ Act	of 194	40				
1(b).												
(Print or Type F	Responses)											
1. Name and Address of Reporting Person *2. IssuerLENAZ LUIGI MDSymbol				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			SPECTI PHARM	TRUM RMACEUTICALS INC [SPPI]				(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of (Month/D	[°] Earliest Tra ay/Year)	ansaction			Director X Officer (given below)		6 Owner er (specify		
157 TECHN	IOLOGY DRI	VE	06/08/20	007				· · · · · · · · · · · · · · · · · · ·	Scientific Offic	er		
(Street) 4. If Amer Filed(Mon 06/12/20				Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
			-				Applicable Line) _X_ Form filed by One Reporting Person					
IRVINE, CA	A 92618		00/12/20	507					More than One R			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ties Acc	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	n Date, if Transaction(A) or Disposed of Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			of	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)					
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
				Coue v	Amount	(D)	Thee			Common		
Common Stock	06/08/2007			А	25,000 (1)	А	\$0	105,845 <u>(2)</u>	Ι	stock held by spouse.		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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						
1	Director	10% Owner	Officer	Other			
LENAZ LUIGI MD 157 TECHNOLOGY DRIVE IRVINE, CA 92618			Chief Scientific Officer				
Signatures							

/S/ Shyam 06/20/2007 Kumaria

<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).

Shares were issued to M. Dianne DeFuria, Dr. Lenaz's spouse, for services rendered to the Company under a Consulting Agreement dated
(1) as of September 25, 2002, and the release of all liability of the Company by Ms. DeFuria pursuant to a Common Stock Agreement and Release, by and between her and the Company, dated June 8, 2007.

(2) Of the 105,845 shares of common stock beneficially owned by Dr. Lenaz, 80,845 are held directly by him.

Remarks:

This amendment corrects the beneficial number of shares acquired from 30,000 to 25,000.

Shyam Kumaria on behalf of Dr. Lenaz by Power of Attorney.

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.