VioQuest Pharmaceuticals, Inc. Form 3 February 17, 2006 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 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. Title of Derivative Security

(Instr. 4)

1. Name and Addre Person <u>*</u> LAU JOHNS	1	U	2. Date of Event Requirir Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol VioQuest Pharmaceuticals, Inc. [VQPH]				
(Last) (F	First)	(Middle)	11/29/2005	4. Relationshi Person(s) to I	ip of Reporting ssuer	5. If Amendment, Date Original Filed(Month/Day/Year)			
3300 HYLAND (s COSTA MESA	treet)			X Director Officer	(Check all applicable) <u>X</u> Director Officer (give title below) (specify below)		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (S	tate)	(Zip)	Table I -	Non-Derivat	ive Securiti	es Be	neficially Owned		
1.Title of Security (Instr. 4)			2. Amount Beneficial (Instr. 4)	t of Securities ly Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.			
Common Stock	, \$.001 p	ar value	0		D	Â			
Reminder: Report o owned directly or in	-	te line for ea	ch class of securities benef	ficially S	EC 1473 (7-02)			
Persons who 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.									
Table	e II - Deri	vative Secu	rities Beneficially Owned	(e.g., puts, calls,	warrants, opt	tions, c	onvertible securities)		

2. Date Exercisable and 3. Title and Amount of

Expiration Title

Securities Underlying

Amount or

Number of

Derivative Security

(Instr. 4)

Expiration Date

Exercisable Date

(Month/Day/Year)

Date

4.

Conversion

or Exercise

Derivative

Price of

Security

5.

Ownership

Derivative

Security:

Direct (D)

or Indirect

Form of

Number:

6. Nature of Indirect Beneficial Ownership (Instr. 5)

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Shares

(I) (Instr. 5)

Reporting Owners

Reporting Person

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
LAU JOHNSON YIU NAM 3300 HYLAND AVENUE COSTA MESA, CA 92626		Â	Â	Â		
Signatures						
/s/ Johnson Lau 02/2	6/2006					
**Signature of	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.