## Edgar Filing: ELITE PHARMACEUTICALS INC /DE/ - Form 3

#### ELITE PHARMACEUTICALS INC /DE/

Form 3 July 05, 2007

## FORM 3

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

**OMB APPROVAL** 

**OMB** Number:

3235-0104

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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 \*

LEVENSON ROBERT J

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

06/26/2007

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

ELITE PHARMACEUTICALS INC /DE/ [ELI]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

C/O ELITE

PHARMACEUTICALS,

INC., Â 165 LUDLOW AVENUE

(Street)

10% Owner \_X\_ Director Officer \_Other

(give title below) (specify below)

(Check all applicable)

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person

Form filed by More than One

Reporting Person

NORTHVALE, NJÂ 07647

(City) (State) (Zip)

1. Title of Security (Instr. 4)

Table I - Non-Derivative Securities Beneficially Owned

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership

4. Nature of Indirect Beneficial Ownership

Form: Direct (D) or Indirect (I)

(Instr. 5)

(Instr. 5)

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

Date

SEC 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** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** 

4 Conversion or Exercise Price of

5. Ownership Form of Derivative

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

(Instr. 4)

**Expiration Title** Exercisable Date

Amount or Number of

Derivative Security: Security Direct (D)

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Shares

or Indirect
(I)

(Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LEVENSON ROBERT J C/O ELITE PHARMACEUTICALS, INC. 165 LUDLOW AVENUE NORTHVALE, NJÂ 07647

 $\hat{A}$  X  $\hat{A}$   $\hat{A}$   $\hat{A}$ 

## **Signatures**

/s/ Robert J.

07/05/2007

Levenson

Date

\*\*Signature of Reporting Person

# **Explanation of Responses:**

### No securities are beneficially owned

- \* 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).

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#### **Remarks:**

No securities are beneficially owned.

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.

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