FORM D

REOD S.B.C.

UNITED STATES **ECURITIES AND EXCHANGE COMMISSION** Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES RSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APP	AOVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ge burden
hours per respon	nse16.00

SEC USE O	NLY
Prefix	Serial
DATE RECEIV	/ED
1	

Name of Offering (check if this is an amendment and name has changed, and indicate change.) O	ffering of Common Stock, Warrant
to Purchase Common Stock, and Subordinated Promissory Note	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	
_	
A. BASIC IDENTIFICATION DATA	111 1811 11211 (1818 HING 18110 18180 HING ENDER HINGE
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	.
Enrobed Ventures, Inc.	03058412
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
81 Ingell Street, Taunton, MA 02780	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Development, licensing and sale of food preparation and processing tech	hnology. 1232641
Type of Business Organization	
x corporation limited partnership, already formed other (please specify):
business trust limited partnership, to be formed	PROCESSEI
Month Year	
Actual or Estimated Date of Incorporation or Organization: 04 02 X Actual Esti Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	mated
CN for Canada; FN for other foreign jurisdiction)	DE THOMSOM
GENERAL INSTRUCTIONS	FINANCIAL

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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		seeds. Should be Jan 4 1 141 and the	A MAKE D	NA REIN (GRAND) VEDY (18	Secretary and distance of the second	عرير المستعدد والمعارض والمستعدد والمستعدد المستعدد المستعدد المستعدد المستعدد المستعدد المستعدد والمستعدد المستعدد والمستعدد والمستعد والمستعدد والمستعد والمستعدد والمستعد والمستعدد والمستعدد والمستعدد والمستعدد والمستعدد والمستعدد وال	
2.	Enter the information i	•	•				
	-		uer has been organized w	•			
				•		f a class of equity securities	of the issuer.
			f corporate issuers and of	corporate general and m	anaging partners of	f partnership issuers; and	
	Each general and	managing partner o	f partnership issuers.				
Che	ck Box(es) that Apply:	Promoter	X Beneficial Owner	X Executive Office	r 🗵 Director	General and/or Managing Partner	
Full	Name (Last name first,	if individual)	·				
:	Stevens, Paul K.						
Busi	ness or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)			
i	81 Ingell Street	, Taunton, MA	02780				
Chec	ck Box(es) that Apply:	Promoter	X Beneficial Owner	Executive Office	r Director	General and/or Managing Partner	
Full	Name (Last name first,	if individual)		-			
]	Lewis, Alan						
Busi	ness or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)			
	347 Congress Str	eet, Boston, M	MA 02110 c/o Ken	sington Investmen	nts		
Che	ck Box(es) that Apply:	Promoter	X Beneficial Owner	Executive Office	r X Director	General and/or Managing Partner	
Full	Name (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·				. <u>-</u>
	Mastromàtteo, Ri	chard					
Busi	iness or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)			
	c/o 81 Ingell St	reet, Taunton,	MA 02780				
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Office	r 🛭 Director	General and/or Managing Partner	
Full	Name (Last name first,	if individual)					
	Zucker, William						
Bus	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)			
	c/o Gadsby Hanna	h LLP, 225 Fra	nklin Street, Bos	ton, MA 02110			
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Office	r Director	General and/or Managing Partner	
Full	Name (Last name first,	if individual)			<u> </u>		
Bus	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)			
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Office	r Director	General and/or Managing Partner	
Full	Name (Last name first,	if individual)					
Bus	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)		•	<u> </u>
Che	ck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Office	r Director	General and/or Managing Partner	····
Full	Name (Last name first,	if individual)					
Bus	iness or Residence Add	ress (Number and	Street, City, State, Zip Co	ode)			

y.	47.4	M	er serva.		B. T	FORMATI	on abou	i offeri	VG 💛	* 3/84		4-14	(P) 4
1.	Has the	issuer sold	, or does th	e issuer in	itend to sel	ll to non-a	ccredited in	nvestors in	this offeri	no?		Yes	No X
1.	mus me	13340. 3314	, 01 4003 11			Appendix,				-	•••••	U	(A)
2.	What is	the minim	um investm					-				<u>\$ 10,0</u>	000
												Yes	No
3.		-	permit joint									X	
4.	commiss If a perso or states	sion or sim: on to be lis , list the na	ilar remunei ted is an ass	ation for s ociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok ore than five	ers in conne er or deale (5) person	ction with r registered is to be list	sales of sec I with the S ed are asso	curities in the EC and/or	irectly, any he offering, with a state ons of such		/A
Ful	l Name (I	Last name	first, if indi	vidual)									
Bus	siness or I	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	ip Code)						
Nar	ne of Ass	ociated Br	oker or Dea	ıler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	" or check	individual	States)		•••••••			•••••		☐ All	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (l	Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	city, State, 2	Zip Code)						
Na	me of Ass	sociated Bi	oker or De	aler		<u></u>	*****		·		· · · · · · · · · · · · · · · · · · ·		
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers		·		1140		
	(Check	"All States	or check	individual	States)		**************	•••••		•••••••		☐ Al	1 States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Fu	II Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)						
Na	me of As	sociated B	roker or De	aler		· · · · · · · · · · · · · · · · · · ·		10000					
Sta	ates in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						****
	(Check	"All State	s" or check	individua	l States)		••••••	······································		•••••		☐ A1	l States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check					
	this box and indicate in the columns below the amounts of the securities offered for exchange and					
	already exchanged.	Aggregate		Am	ount Alrea	adv
	Type of Security	Offering Price			Sold	
	Debt	\$ 150,000	_ \$	150	0,000	
	Equity	<u>\$174,000</u>	_ \$	174	4,000	
	🗓 Common 🦳 Preferred					
	Convertible Securities (including warrants)	\$ <u>-</u>	\$	<u>.</u>	-	
	Partnership Interests	§ 0	\$; ()	
	Other (Specify)	\$ 0	\$)	
	Total		_		+,000	
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				A agregate	•
		Number Investors		Do	Aggregate llar Amou Purchase	int
	Accredited Investors	11	_	\$ <u>_3</u> :	24,000	
	Non-accredited Investors	0	_	\$	-	
	Total (for filings under Rule 504 only)		_	\$		
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.					
	Type of Offering	Type of Security		Do	llar Amo Sold	unt
	Rule 505	N/A	_	\$	N/A_	
	Regulation A		_	\$		
	Rule 504		-	\$		
	Total		. ;	\$		
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees	[] \$:		
	Printing and Engraving Costs		\$;	··	
	Legal Fees	5	- :] \$	6	,000	
	Accounting Fees			<u> </u>		
	Engineering Fees		_ 	;		
	Sales Commissions (specify finders' fees separately)		_			
	Other Expenses (identify)	······	_]	;		
	Total	_	_ 7 \$	6	.000	

4	MAC: OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PR	OCEEDS (*)	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ 318,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$	\$
	Purchase of real estate] \$	\$
	Purchase, rental or leasing and installation of machinery and equipment] \$	\$
	Construction or leasing of plant buildings and facilities	\$	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another		
	issuer pursuant to a merger)	•	_
	Repayment of indebtedness	•	
	Working capital	="	_
	Other (specify):] \$	\$
] \$	\$
	Column Totals] \$	x \$ 318,000
	Total Payments Listed (column totals added)	x \$_3	18,000
Ì.	D. FEDERAL SIGNATURE		M. Art
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice in nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Ru	ion, upon writte	
	uer (Print or Type) Enrobed Ventures, Inc.	ate 57.19.	?
Na	me of Signer (Print or Type) Paul K. Stevens President		4

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Sometiment of the second of th	E. STATE SIGNATURE	1440	
		Yes	No X
:	See Appendix, Column 5, for state response.		
•	•	filed a no	tice on Form
The undersigned issuer hereby undertake issuer to offerees.	es to furnish to the state administrators, upon written request, information	tion furn	ished by the
limited Offering Exemption (ULOE) of the	ne state in which this notice is filed and understands that the issuer cla		
er has read this notification and knows the control thorized person.	ontents to be true and has duly caused this notice to be signed on its beha	alf by the	undersigned
Print or Type) obed Ventures, Inc.	Signature Date 5.7.0	3	
Print or Type)	Title (Print or Type)		
l K. Stevens	President		
	Is any party described in 17 CFR 230.26 provisions of such rule?	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be en limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer class of this exemption has the burden of establishing that these conditions have been satisfied. The erint or Type Signature Signature Date Signature	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification See Appendix, Column 5, for state response. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a not D (17 CFR 239.500) at such times as required by state law. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnissuer to offerees. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the of this exemption has the burden of establishing that these conditions have been satisfied. Print or Type) Date Signature Date The (Print or Type) Date The (Print or Type)

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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1	Intendato non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 investor and rchased in State C-Item 2)		under Sta (if yes, explana	ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ					,				
AR									
CA									
СО									
СТ						,			
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA		Х	Common Stock,*	1	\$324,000	0	\$0		
MI									
MN									
MS									

	1012		S _a ranananyysa	-APP	ENDIX 🐮		State of the	A	540. S Y
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	of security aggregate ing price d in state		Type of investor and amount purchased in State (Part C-Item 2)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ОК									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT							-		
VT									
VA									
WA									
wv									
WI									

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1	Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			4 Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY PR									