FORM D

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



### FORM D

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

SEC USE	ONLY
Prefix	Serial
DATE RE	CEIVED

	<u></u>		
- 12 2	f this is an amendment and name has changed, and indica	<b>3</b> ?	
	orporation – Debentures, Warrants, Additional I		
	nat apply): [ ] Rule 504 [ ] Rule 505 [ x ] Rule 506	[] Section 4(6) [] ULOE	CONTROL CONTROL
Type of Filing: [x ] New Filing	g [] Amendment		
	A. BASIC IDENTIFICATION DA	ΓA ,	SEF 9 1 2005
1. Enter the information reques	sted about the issuer	VE.	
Name of Issuer [ ] check in	f this is an amendment and name has changed, and indicat	e change.)	185 (6)
Generex Biotechnology Corp	oration		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Includir	ng Area Çode)
32 Harbour Square, Suite	202, Toronto, Ontario Canada M5J 2G2	(416) 364-2551	
Address of Principal Business	Operations (Number and Street, City, State, Zip Code)	Telephone Number (Includir	ng Area Code)
(if different from Executive Of	fices)		
Brief Description of Business		<u></u>	
	anufacture and sale of pharmaceutical products		
Type of Business Organization			3888385-
[x] corporation		other (please specify): limited liabili	PROVESSED
[ ] business trust	[ ] limited partnership, to be formed		
	Month Year	•	SEP 2 8 2005 €
Actual or Estimated Date of Incom		[x] Actual [] Estimated	Title a silve a management
Jurisdiction of Incorporation or Or	ganization: (Enter two-letter U.S. Postal Service abbreviation for		THOMSON
	CN for Canada; FN for other foreign jur	isdiction) [D][E]	FINANCIAI

#### GENERAL INSTRUCTIONS

#### Federal:

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 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.

#### State:

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 in 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 state exemption unless such exemption is predicated on the filing of a federal notice.



# A. BASIC IDENTIFICATION DATA

# 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;

Check Box(es) that apply:	[]	Promoter	[]	Beneficial Owner	[]	Executive Officer	[ x]	Director	[]	General and/or
		÷		and Manager						Managing Partner
ull Name (Last name first,	if ind	ividual)								
Barratt, John P.										
Business or Residence Add	ress (1	Number and S	treet, C	ity, State, Zip Code)						
33 Harbour Square, Ste. 203	2. Tore	onto Ontario	Canada	M512G2						
Check Box(es) that apply:			[]	Beneficial Owner	[ x]	Executive Officer	[ x]	Director	[]	General and/or
										Managing Partner
Full Name (Last name first,	if ind	ividual)								
Gluskin, Anna E.										
Business or Residence Add	ress (1	lumber and S	treet, C	ity, State, Zip Code)						
33 Harbour Square, Ste. 20	2. Tore	onto Ontario	Canada	M51.2G2						
Check Box(es) that apply:		Promoter	[ x]	Beneficial Owner	[ x]	Executive Officer	[ x]	Director	[]	General and/or
										Managing Partner
Full Name (Last name first,	if ind	ividual)				**************************************		****		
Perri, Rose C.										
Business or Residence Add	ress (N	Number and S	treet, C	ity, State, Zip Code)						
33 Harbour Square, Ste. 20	? Tor	onto Ontario	Canad	M51.2G2						
Check Box(es) that apply:		Promoter		Beneficial Owner	[ x]	Executive Officer	[ x]	Director	[]	General and/or
						•				Managing Partner
Full Name (Last name first,	if ind	ividual)				<del></del>				
Bernstein, Gerald										
Business or Residence Add	ress (1	Number and S	Street, C	ity, State, Zip Code)						
33 Harbour Square, Ste. 20	2 Tor	onto Ontario	Canad	M51.2G2						
Check Box(es) that apply:		Promoter	[]	Beneficial Owner	[]	Executive Officer	[ x]	Director	[]	General and/or
										Managing Partner
Full Name (Last name first	if ind	ividual)				<del></del>				
Allport-Settle, Mindy J.										
Business or Residence Add	ress (1	Number and S	Street, C	ity, State, Zip Code)						
33 Harbour Square, Ste. 20	? Tor	onto Ontario	Canad	a M51.2G2						
Check Box(es) that apply:		Promoter Promoter	[]	Beneficial Owner	[]	Executive Officer	[ x]	Director	[]	General and/or
										Managing Partner
Full Name (Last name first	, if inc	lividual)								
McGee, Brian T.										
Business or Residence Add	ress (1	Number and S	Street, C	ity, State, Zip Code)						
33 Harbour Square, Ste. 20	2 Tor	onto Onterio	Canad	a M512G2						
Check Box(es) that apply:	[]	Promoter		Beneficial Owner	[ x]	Executive Officer	[]	Director	[]	General and/or
										Managing Partner
Full Name (Last name first	, if inc	lividual)				<del></del>				
Clataban Mani-		-								
Fletcher, Mark Business or Residence Add	iress (	Number and S	Street, C	City, State, Zip Code)						
33 Harbour Square, Ste. 20	2, 101	onto, Untario	) Canad	a MOJ ZUZ						

Check Box(es) that apply: [ ] Promoter [ ] Beneficial Owner	[]	Executive Officer	[ x]	Director	[]	Ň.
Full Name (Last name first, if individual)					*	<del></del>
Amanatides, Peter G.						
Business or Residence Address (Number and Street, City, State, Zip Code)						
3 Harbour Square, Ste. 202, Toronto, Ontario Canada M5J 2G2						
Check Box(es) that apply: [] Promoter [x] Beneficial Owner	[]	Executive Officer	[]	Director	[]	General and/c Managing Part
Full Name (Last name first, if individual)	**					
Omicron Master Trust Business or Residence Address (Number and Street, City, State, Zip Code)						
550 Fifth Avenue, 24th Floor, New York, NY 10019						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. IN	FORMAT	TION ABO	UT OFFE	RING				, , , , , , , , , , , , , , , , , , , ,
1. Has th	e issuer sol	ld, or does	the issuer in	itend to sell	, to non-acc	credited inv	estors in th	is offering?				Yes	No [x]
<ul> <li>Answer also in Appendix, Column 2, if filing under ULOE.</li> </ul>											l J	[ ^ ]	
2. What i	s the minir	num invest	ment that w	rill be accep	sted from a	ny individu	al?					\$500,00	00
3. Does the offering permit joint ownership of a single unit?										Yes	No [ x ]		
directi in con persor list the	ly or indire nection with or agent of a name of t	ctly, any co th sales of s of a broker o he broker o	ommission of dealer report of the securities in the securities in the securities in the securities of the securities in the securities of	or similar re the offerin gistered wit more than t	ho has been emuneration g. If a perso h the SEC affive (5) person the the information in	n for solicita on to be list and/or with sons to be li	ation of pur ed is an ass a state or s sted are ass	chasers ociated tates,	nly.			( )	[ ^ ]
Full Nam	ne (Last nai	me first, if	individual)	N/A [More	than five p	ersons to be	e listed are	associated v	with the bro	ker/dealer	identified b	elow.]	
		ROUP, IN		and Street,	City, State,	Zip Code)							
		STREET, Broker or		0, SAN FR	ANCISCO.	CA 94108	·····	<del></del>					
		GROUP, IN		ed or Intend	ls to Solicit	Purchasers		<del></del>					·
(Check "	All States"	or check in	ndividual S	tates)			•••••		. [ ] All	States			
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [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]	
Full Nan	ne (Last na	me first, if	individual)										
Business	or Resider	nce Address	s (Number	and Street,	City, State,	Zip Code)					·		······································
Name of	Associated	d Broker or	Dealer			·			<del></del>				
States in	Which Per	son Listed	Has Solicit	ed or Intend	ds to Solicit	Purchasers	<u> </u>						
(Check "	'All States"	or check in	ndividual S	tates)			,		. [ ] All	States			
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [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]	
Full Nan	ne (Last na	me first, if	individual)										
Business	or Reside	nce Addres	s (Number	and Street,	City, State,	Zip Code)							
Name of	Associated	d Broker or	Dealer										
States in	Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solici	Purchasers	 3						
								•••••••••••••••••••••••••••••••••••••••	. [ ] All	States			
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [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]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securiti							
already sold. Enter "0" if answer is "none" of check this box [ ] and indicate in the colur							
exchange and already exchanged.	inis ociow the amounts (	of the securities offered for					
				Aggregate		A	Amount Already
Type of Security	x #9			Offering Price			Sold
Debt			\$_	2,000,000*		\$_	2,000,000*
Equity		.,,,,,,	\$ _	*		\$ _	*
[X]Comm	on [ ] Preferre	d					
Convertible Securities (including w	rarrants)		\$	*	_	\$_	*
Partnership Interests			\$		_	\$	
		)	\$			\$	
Total			\$ _	2,000,000*		\$_	2,000,000*
Answer also in Appendix, C	olumn 3, if filing under	ULOE.					
2. Enter the number of accredited and non-accr	edited investors who pu	rchased securities in this					
offering and the aggregate dollar amounts o							
indicate the number of persons who have putheir purchases on the total lines. Enter "0"	rchased securities and the	ne aggregate dollar amount of					
their purchases on the total lines. Enter "0"	n answer is mone of "2	CCTO.					Aggregate
•				Number			Dollar Amount
				Investors			of Purchases
Accredited Investors				4	\$		2,000,000*
Non-accredited Investors				0	\$		0
Total (for filings under Rule	504 only)				\$		
Answer also in Appendix, C	olumn 4, if filing under	ULOE.					
3. If this filing is for an offering under Rule 50							
securities sold by the issuer, to date, in offer prior to the first sale of securities in this off Question 1.							
				Type of			Dollar Amount
Type of offering				Security			Sold
Rule 505						\$	
Regulation A						° -	
Rule 504					_	\$ -	<del></del>
						_	
Total						\$ _	
4. a. Furnish a statement of all expenses in cor							
securities in this offering. Exclude amounts  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	e estimate.					
Transfer Agent's Fees  Printing and Engraving Costs					[ ]		
					[ .		10,000
Legal Fees					x J		10,000
Engineering Fees					l.		
Sales Commissions (specify finder					1.		
Other Expenses (identify)S	• • • • • • • • • • • • • • • • • • • •				{ `` [v		100
Other Expenses (ruentity)	tate milk rec	· · · · · · · · · · · · · · · · · · ·	•		[x	ı Þ	100

\*Includes (i) 6% Secured Convertible Debentures due December 8, 2006 in the aggregate amount of \$2,000,000 having a conversion price of \$0.60 per share of the issuer's common stock (the "Debentures"), (ii) warrants to purchase an aggregate of 2,439,024 shares of the issuer's common stock at the exercise price of \$0.82 per share (the "Warrants"), (iii) Additional Investment Rights to purchase (A) additional Debentures in the aggregate amount of \$2,000,000 having a conversion price of \$0.82 (the "AIR Debentures") and (B) additional warrants to purchase 1.00% of the shares of common stock underlying the AIR Debentures when issued with an exercise price of \$0.82 per share (the "AIR Warrants"). This filing covers the Debentures, Warrants and Additional Investment Rights, as well as the securities issuable upon conversion/exercise of the Debentures, Warrants, AIR Debentures and AIR Warrants. The filing also covers 170,732 shares of common stock and warrants to purchase 60,000 shares of common stock at the exercise price of \$0.82 issued to The Shemano Group, Inc. as part of the broker's fee.

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response art 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."	se to				\$	1,989,900
5. Indicate below the amount of the adjusted gross proceeds to the issuer use 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 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.	the		Payments to Officers, Directors, & Affiliates		P	ayments to Others
Salaries and fees	[]	\$		[]	\$	
Purchase of real estate	[]	\$		[]	\$	AND MAN
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	[] [] [] _[]	\$ \$ \$		[ ] [ x] [ ]	\$ \$ \$ \$	1,989,900
Column Totals		\$		[ x]	\$ 9,90	1,989,900

#### D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)  GENEREX BIOTECHNOLOGY CORPORATION	Signature Date September_, 2005
Name of Signer (Print or Type)	Title of Signer (Print or Type)
Mark A. Fletcher	Executive Vice President and General Counsel

ATTENTION\_

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