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ASTRUE MICHAEL J Form 3 April 11, 2005

FORM 3

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

OMB APPROVAL

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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 *

À ASTRUE MICHAEL J

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

04/08/2005

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

AROULE INC [AROL]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

C/O TRANSKARYOTIC THERAPIES INC, 700 MAIN STREET

(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

CAMBRIDGE, MAÂ 02139

(State)

1. Title of Security

(City)

(Instr. 4)

(Zip)

Table I - Non-Derivative Securities Beneficially Owned

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership Form:

4. Nature of Indirect Beneficial Ownership

(Instr. 5)

Direct (D) or Indirect (I)

(Instr. 5)

SEC 1473 (7-02)

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

> 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 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

5. Ownership Form of Derivative

Security:

Direct (D)

6. Nature of Indirect Beneficial Ownership

(Instr. 4)

Expiration Title Date Exercisable Date

Amount or Number of

Price of Derivative Security

(Instr. 5)

1

Shares

or Indirect
(I)
(Instr. 5)

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

ASTRUE MICHAEL J

C/O TRANSKARYOTIC THERAPIES INC 700 MAIN STREET CAMBRIDGE, MAÂ 02139

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

Signatures

Robert J. Connaughton, Jr. by Power of Attorney 04/11/2005

**Signature of Reporting Person Date

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).

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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