Edgar Filing: POSTBINDER JOSEPH - Form 3

POSTBINDER JOSEPH Form 3 April 05, 2002

U.S. SECURITIES AND EXCHANGE COMMISSION Washington, DC 20549

FORM 3

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(f) of the Investment Company Act of 1940

1. Name and Address of Rep	orting Person*							
Postbinder	joseph							
(Last)	(First)	(Middle)						
INDUSTRIAL ZONE EREZ, P.O. B	OX 779							
	(Street)							
ASHKELON	Israel	78101						
(City)	(State)	(Zip)						
2. Date of Event Requiring	Statement (Month/Day/	Year)						
March 26, 2002								
3. IRS Identification Numb	er of Reporting Person	, if an Entity (Voluntary)						
4. Issuer Name and Ticker	or Trading Symbol							
Pawnbrokers Exchange Inc.								
5. Relationship of Reporti (Check all applicable)	ng Person to Issuer							
<pre>[X] Director [X] Officer (give titl</pre>		10% Owner Other (specify below)						
6. If Amendment, Date of O	riginal (Month/Day/Yea	r)						
7. Individual or Joint/Gro	Individual or Joint/Group Filing (Check applicable line)							
[X] Form Filed by One	[X] Form Filed by One Reporting Person							
[_] Form Filed by More	[_] Form Filed by More than One Reporting Person							

Table I -- Non-Derivative Securities Beneficially Owned

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1. Title of Security (Instr. 4)	2. Amount of Securit Beneficially Owne (Instr. 4)	ed Indirect (I) 4	. Natur (Inst
Common Stock	19,440,212	D	
			=====
* If the Form is filed by more 5(b)(v).	than one Reporting Perso	on, see Instruction	
Reminder: Report on a separate li owned directly or indir		rities beneficially	
(Prin	t of Type Responses)		
		(Over)	
TON 0 / 1 / 1			
FORM 3 (continued) Table II Derivat	ive Securities Beneficial	ly Owned	
	ants, options, convertibl		
	3. Tit	le and Amount of Securities	
	Unc	derlying Derivative Security ustr. 4)	4. Con

4. Conve

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			_	(Month/Day/Year)						unt			
		Derivati (Instr.	ve I				Titl	e		of	nber		Exerc Price Deriv Secur
		of Respo											
unp	Tanacion	or nespo											
Ву: 	/s/ Jose	eph Postb							4/3/02				
**S		eph Postb of Repor		Person					Date				
* *	Intent: Violat:	ional mis ions.	stater	ments or	omissic	ns of fa	cts con	stitute	Federal	Crimin	ıal		
	See 18	U.S.C. 1	.001 ar	nd 15 U.S	s.c. 78f	f(a).							

Note: File three copies of this form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure.

(Print of Type Responses)

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