## Edgar Filing: VIDA JULIUS A - Form 4

VIDA JULIU Form 4	US A											
March 19, 20	007											
FORM	<b>14</b> UNITED		SECU	TTIES	•	ND EV(	<b>• • • • •</b> •	NCEC	OMMESION		PROVAL	
Check th	Washington, D.C. 20549							OWINII55ION	OMB Number:	3235-0287		
if no long	Ter				<b>.</b> T 1					Expires:	January 31, 2005	
subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNE SECURITIES					NERSHIP OF	Estimated average burden hours per		
Form 5 obligatio may cont See Instru 1(b).	Filed pr ns Section 17	7(a) of the	Public U	tility H	olc		ipany	Act of	e Act of 1934, 1935 or Sectior 0	response	0.5	
(Print or Type I	Responses)											
VIDA JULIUS A Symbol				er Name and Ticker or Trading AREX INC [MEDX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				(Check	k all applicable	)			
	INTL PHARM ANTS, 27 SAC	HEM	(Month/E 03/15/2	-	)				X Director Officer (give below)		Owner er (specify	
Filed(Mor				endment, Date Original nth/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
GREENWI	CH, CT 06830								Person		porting	
(City)	(State)	(Zip)	Tab	le I - Noi	1-D	erivative S	Secur	ities Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	r) Executio any		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
G				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	03/15/2007			S		4,931	D	\$ 12.09	88,509	D		
Common Stock	03/15/2007			S		10,069	D	\$ 12.05	78,440	D		
Common Stock									200	Ι	By Son	
Common Stock									330	Ι	By Spouse	

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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Relationships

10% Owner Officer Other

## **Reporting Owners**

**Reporting Owner Name / Address** 

VIDA JULIUS A C/O VIDA INTL PHARM CONSULTANTS 27 SACHEM ROAD GREENWICH, CT 06830

## **Signatures**

JULIUS A.	
VIDA	03/19/2007
<u>**</u> Signature of Reporting Person	Date

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(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).

Director

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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.