Edgar Filing: ANTARES PHARMA INC - Form 4

ANTARES Form 4	S PHARMA INC									
May 14, 20	007									
FOR	M 4 _{UNITED}	STATES S	ECURITIES A	ND EXCH	IANGE	COMMISSION		APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287		
Check this box if no longer subject to Section 16. SECURITIES					IAL OV	VNERSHIP OF	Expires: Estimated burden hor	ed average		
Form 4 Form 5 obligat may co	Filed put	(a) of the Pu		ling Comp	any Act	nge Act of 1934, of 1935 or Sectio 940	response	-		
(Print or Type	e Responses)									
1. Name and Address of Reporting Person <u></u> GUETH ANTON			2. Issuer Name and ymbol		-	5. Relationship of Reporting Person(s) to Issuer				
(Last)				ES PHARMA INC [AIS] Earliest Transaction (Check			k all applicable)			
	ARES PHARMA, PHILLIPS BLVD	0	Month/Day/Year) 5/10/2007			X Director Officer (give below)		% Owner her (specify		
	(Street)	. If Amendment, Da iled(Month/Day/Year	f Amendment, Date Original ed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
EWING, N	NJ 08618					Form filed by M Person	Iore than One R	Reporting		
(City)	(State)	(Zip)	Table I - Non-D	Derivative Se	curities A	cquired, Disposed of	f, or Beneficia	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da any (Month/Day/	Code	4. Securities Acquired (A Disposed of (Instr. 3, 4 ar (A o Amount (E	(D) nd 5) A) r	Securities F Beneficially (Owned (5. Ownership Form: Direct D) or Indirect I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: R	eport on a separate line	e for each class	s of securities benef	icially owned	directly o	r indirectly.				
				informat required	ion conta to respo a curren	pond to the collec ained in this form and unless the forn atly valid OMB con	are not n	SEC 1474 (9-02)		
	Tab		ive Securities Acq its, calls, warrants			Beneficially Owned ecurities)				
1. Title of Derivative		saction Date 3 /Day/Year) E	BA. Deemed Execution Date, if	4. 5 Transaction	. Number Derivative	of 6. Date Exercisa Expiration Date		7. Title and Amount of Underlying Securities		

Underlying Securities Γ

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr.	8)	Securities (Month/Day/Yes Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		'Year)	(Instr. 3 and 4)		() (
				Code	V	(A) ((D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 1.65	05/10/2007		A		61,870 (1)		(2)	05/09/2017	Common Stock	61,870	

Reporting Owners

Reporting Owner Name / Address								
r g the second	Director	10% Owner	Officer	Other				
GUETH ANTON C/O ANTARES PHARMA, INC. 250 PHILLIPS BLVD, SUITE 290 EWING, NJ 08618	Х							
Signatures								
Robert F. Apple as attorney-in-fact f Gueth	05/14/2007							
**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).
- (1) 31,870 options were taken in lieu of the Director's annual cash compensation.
- (2) The option vests in four equal quarterly installments.
- (3) Not applicable.

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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