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INTERNATIONAL STAR INC Form 5 February 14, 2006 FORM 5

5 obligations

1(b).

Reported

Form 4 Transactions Reported

(Last)

OMB APPROVAL OMB UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per **OWNERSHIP OF SECURITIES** response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer Therrell Joseph E Jr Symbol INTERNATIONAL STAR INC (Check all applicable) [ILST] (Middle) 3. Statement for Issuer's Fiscal Year Ended (First) _X_ Director 10% Owner Officer (give title Other (specify (Month/Day/Year) below) below) 12/31/2005 **1818 MARSHALL STREET** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) SHREVEPORT, LAÂ 71161

X Form Filed by One Reporting Person Form Filed by More than One Reporting Person

| (City) | (State) | (Zip) Tab | le I - Non-Der | ivative Secu | rities | Acquir | ed, Disposed of, | or Beneficiall | y Owned |
|--|---|---|---|--|--------|------------|---|---|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securitie (A) or Disp (Instr. 3, 4) | osed c | of (D) | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock, \$0.001 par value | 08/05/2005 | Â | S4 | 235,000 | . , | | 1,194,545 | D | Â |
| Common Stock, \$0.001 par value | 08/05/2005 | Â | S4 | 265,000 | А | \$ 0.02 | 1,194,545 | D | Â |

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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. SEC 2270 (9-02)

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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A Disposed of (Instr. 3, 4, 4 5) | A) or f (D) |) | | 7. Title and Amour Underlying Securit (Instr. 3 and 4) | |
|---|---|---|---|---|---|----------------|---------------------|--------------------|--|---------------------|
| | | | | | (A) | (D) | Date Exercisable | Expiration Date | Title | Amo Num Share |
| Warrants | \$ 0.15 | 03/03/2005 | Â | S4 | 10,000 | Â | 03/03/2005 | 12/03/2006 | Common Stock | 10, |
| Warrants | \$ 0.05 | 08/05/2005 | Â | S4 | 235,000 | Â | 08/05/2005 | 08/05/2006 | Common Stock | 235 |
| Warrants | \$ 0.05 | 08/05/2005 | Â | S4 | 265,000 | Â | 08/05/2005 | 08/05/2006 | Common Stock | 265 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| I O | Director | 10% Owner | Officer | Other | | | |
| Therrell Joseph E Jr 1818 MARSHALL STREET SHREVEPORT, LA 71161 | ÂX | Â | Â | Â | | | |

Signatures

Person

/s/ Joseph E. Therrell, Jr. <u>**</u>Signature of Reporting 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).

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.