Alliqua, Inc. Form 4 April 04, 2011

# FORM 4

#### **OMB APPROVAL**

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005

Form 5 obligations may continue. **SECURITIES** 

Estimated average burden hours per response... 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 1420525 ALBERTA LTD.

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

Alliqua, Inc. [ALQA]

(Check all applicable)

(Last)

(City)

(First) (Middle)

(Zin)

3. Date of Earliest Transaction (Month/Day/Year)

Director Officer (give title \_X\_\_ 10% Owner

1628 WEST 1ST AVENUE, SUITE

(Street)

(State)

216

below)

Other (specify

4. If Amendment, Date Original Filed(Month/Day/Year)

10/21/2009

6. Individual or Joint/Group Filing(Check

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

VANCOUVER, A1 V6J1G1

(City)	(State)	(Zip) Tab	le I - Non-	Derivative Sec	curities	s Acqui	red, Disposed of,	or Beneficiall	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securities comr Disposed (Instr. 3, 4 an	of (D)	red (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common	10/21/2009		Code V A	Amount 1,032,706 (1)	(D)	Price \$ 0.15	,	D	
Common	03/30/2011		D	7,000,000 (2)	D	\$ 0.05	24,057,980	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative			Securities				(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manust		
									Amount		
						Date Exercisable	Expiration Date		or Namel		
									Number		
				C-1- V	(A) (D)			of			
				Coue v	(A) (D)				Shares		

# **Reporting Owners**

Relationships Reporting Owner Name / Address 10% Owner Officer Other Director 1420525 ALBERTA LTD. 1628 WEST 1ST AVENUE, SUITE 216 X VANCOUVER, A1 V6J1G1

### **Signatures**

Harmel Rayat 04/04/2011 \*\*Signature of Date Reporting Person

### **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).
- On October 21, 2009, pursuant to a Warrant Exercise or Exchange Agreement executed on October 21, 2009, 1420525 Alberta Ltd. **(1)** acquired 1,032,706 restricted common shares of HepaLife Technologies, Inc.
- Pursuant to Stock Purchase Agreements executed on March 30, 2011, 1420525 Alberta Ltd. sold 7,000,000 restricted common shares of **(2)** Alliqua, Inc.

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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