Dosoudil Miroslav Form 4 April 06, 2009

FORM 4

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

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Section 16. Form 4 or

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

Dosoudil Miroslav Symbol

(Last) (First) (Middle)

181 LEGRAND AVENUE

(Street)

NORTHVALE, NJ 07647

(State)

03/31/2009

(Zip)

2. Transaction Date 2A. Deemed

(City)

1.Title of

Security

(Instr. 3)

Common

Stock

2. Issuer Name and Ticker or Trading

PHOTONIC PRODUCTS GROUP INC [PHPG]

3. Date of Earliest Transaction (Month/Day/Year) 03/31/2009

4. If Amendment, Date Original

Filed(Month/Day/Year)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities (Month/Day/Year) Execution Date, if

Code Disposed of (D) (Instr. 8)

TransactionAcquired (A) or

(Instr. 3, 4 and 5)

Owned Following Reported (A) Transaction(s)

or (Instr. 3 and 4) Code V Amount (D) Price

A 774

774

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

(Month/Day/Year)

Persons who respond to the collection of SEC 1474 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)

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

10% Owner

6. Ownership 7. Nature of

Indirect

Beneficial

Ownership

(Instr. 4)

(9-02)

Other (specify

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

(Check all applicable)

VP Operations

6. Individual or Joint/Group Filing(Check

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

below)

Form: Direct

Indirect (I)

(Instr. 4)

D

(D) or

Issuer

below)

Person

5. Amount of

Securities

Beneficially

Director

Applicable Line)

X_ Officer (give title

1

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Derivative	Deriv	
Security	Secu	
(Instr. 5)	Bene	
	Own	
	Follo	
	Repo	
	Trans	
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r		
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Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Dosoudil Miroslav

181 LEGRAND AVENUE VP Operations

NORTHVALE, NJ 07647

Signatures

/s/ Miroslav Dosoudil 04/06/2009

**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).

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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