Festuccia Andrea

Form 3

June 25, 2012									
FORM 3 UNITED STAT			TES SECURITIES AND EXCHANGE COMMISSI			MISSION	ON OMB APPROVAL		
	Washington, D.C. 20549				OMB Number:	3235-0104			
INITIAL STATEMENT OF BENEFICIAI					OWNERSHIP OF		Expires:	January 31 2005	
		on 17(a) of	SECUI to Section 16(a) of the Public Utility Hol O(h) of the Investmen	lding Compar	ny Act of 193		Estimated burden hou response 1	average Jrs per	
(Print or Type R	esponses)								
Person Statement			Statement (Month/Day/Year)	equiring 3. Issuer Name and Ticker or Trading S BeesFree, Inc. [BEES]			nbol		
(Last)	(First)	(Middle)	06/19/2012		4. Relationship of Reporting Person(s) to Issuer		Amendment, Date Original d(Month/Day/Year)		
295 CIRCON GIANICOLI		ZIONE		(Chec	k all applicable		(
ROME, L6	(Street)			X Direct Officer (give title belo	rOthe	r Filing ow) _X_F Person F	orm filed by Mo	able Line) ne Reporting	
(City)	(State)	(Zip)	Table I	- Non-Deriva	ative Securit	•	ting Person ally Owne	d	
1.Title of Security (Instr. 4)		2. Amoun	2. Amount of Securities Beneficially Owned		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Sto	ock, \$0.00	1 par value	1,650,00	00	Ι	By Spouse	e		
Reminder: Repo			ch class of securities bene	ficially	SEC 1473 (7-02	2)			
	inforr requi	nation conta red to respo	pond to the collection ained in this form are r nd unless the form dis MB control number.	not					
Т	able II - De	rivative Secu	rities Beneficially Owned	(e.g., puts, call	s, warrants, op	tions, convert	tible securitie	s)	

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	(Derivative Security	or Exercise	FORM OF	(111su. 5)
		(Instr. 4)	Price of	Derivative	
		Title	Derivative	Security:	
			Security	Direct (D)	

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Date	Expiration
Exercisable	Date

Amount or Number of Shares or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships				
FB	Directo	r 10% Owner	Officer	Other		
Festuccia Andrea 295 CIRCONVALLAZIONE GIANICOLEN ROME, L6 00152	SE Â X	ÂX	Â	Â		
Signatures						
/S/ ANDREA FESTUCCIA 06/25/2012						

**Signature of Reporting Date Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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.