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## ARGYROPLE CHRISTOPHER N Form 3 February 11, 2009 **FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION** Washington, D.C. 20549 OMB APPROVAL OMB Number 3235-0104

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> ARGYROPLE CHRISTOPHER N					3. Issuer Name and Ticker or Trading Symbol SOLITRON DEVICES INC [sodi]							
(Last)	(First)	(Middle)			4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)				
(Street)					(Check all applicable) <u> </u>		Person Form filed by More than One					
						Person						
(City)	(State)	(Zip)	Tab	Table I - Non-Derivative Securities Beneficially Owned								
1.Title of Secu (Instr. 4)	rity		Ben	Amount of eficially ( tr. 4)	Securities Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ership	irect Beneficial			
Solitron dev	vices, Inc.		227	7,048		Ι	Dee	p Woods	Capital, LLC			
Reminder: Rep owned directly	or indirectly. Perso	ns who res	pond to the collec	ass of securities beneficially SEC 1473 (7-02)								
information contained in this form are not required to respond unless the form displays a currently valid OMB control number.												
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Der (Instr. 4)	ivative Securi	Expi	ate Exercisable and iration Date <sub>a/Day/Year)</sub>	Securitie	and Amount of es Underlying ve Security )	4. Conversion or Exerci Price of	se F	Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)			

Expiration Title

Date

Date

Exercisable

Derivative

Security

Amount or

Number of

Security:

Direct (D)

or Indirect

Shares

(I) (Instr. 5)

## **Reporting Owners**

<b>Reporting Owner Nar</b>	Relationships						
I B		Director	10% Owner	Officer	Other		
ARGYROPLE CHRIS	STOPHER N						
		Â	ÂΧ	Â	Â		
Â							
Signatures							
Todd rosner	02/11/20	09					
**Signature of Reporting Person	Date						

## **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.