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USCORP
Form 3
July 05, 2002

FORM 3

OMB APPROVAL

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

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(f)
of the Investment Company Act of 1940

(Print or Type Response)

1. Name and Address of Reporting Person*
DULTZ ROBERT
(P.O. Box 5330)
Palm Springs CA 92263
2. Date of Event Requiring Statement
05/14/2002
3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)
4. Issuer Name and Ticker Trading Symbol
USCORP (ISCS)
5. Relationship of Reporting Person(s) to Issuer
X Director X
X Officer
CHIEF EXECUTIVE OFFICER

TABLE I -- NON-DERIVATIVE SECURITIES BENEFICIALLY OWNED

Table with 3 columns: 1. Title of Security (Instr. 4), 2. Amount of Securities Beneficially Owned (Instr. 4), 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5). Row 1: Common Stock, par value \$0.01, 19,347,000, D.

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly by the reporting person.
 * If the form is filed by more than one reporting person, see Instruction 5(b) (v).

2

FORM 3 (CONTINUED)

TABLE II -- DERIVATIVE SECURITIES BENEFICIALLY OWNED
 (E.G., PUTS, CALLS, WARRANTS, OPTIONS, CONVERTIBLE SECURITIES)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/ Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security		
	Date Exercisable	Expira- tion Date	Title 2002 Stock Option Plan	Amount or Number of Shares	
Option (right to buy)	5/14/02	5/14/07	Common Stock	650,000	\$0.00

Explanation of Responses:

By: /s/ Robert Dultz

Date: July 3, 2002

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Robert Dultz
**Signature of Reporting Person

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1013. See also 17 C.F.R. 201.27(a).

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, use additional sheets. See the instructions for filing procedure.

Potential persons who are to respond to the collection of information contained in this form are advised that this collection of information does not impose a reporting burden on individuals. This form displays a currently valid OMB number.