

Splinx Technology Inc.
Form 4
June 03, 2005

FORM 4

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

OMB APPROVAL

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STATEMENT OF CHANGES IN 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 *
WOLFE CURTIS ANDREW

(Last) (First) (Middle)

550 W. CYPRESS CREEK ROAD, SUITE 410

(Street)

FORT LAUDERDALE, FL 33309

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
Splinx Technology Inc. [NA]

3. Date of Earliest Transaction
(Month/Day/Year)
06/02/2005

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)
General Counsel and Secretary

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D)	Code V Amount (D) Price		

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

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SEC 1474
(9-02)

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

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount Underlying Security (Instr. 3 and 4)
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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Stock options	\$ 0.1	06/02/2005	A	125,000					06/02/2005 ⁽¹⁾	01/14/2015	Common stock	125,000
Stock options	\$ 0.1	06/02/2005	A	125,000					06/02/2005 ⁽³⁾	01/14/2015	Common stock	125,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
WOLFE CURTIS ANDREW 550 W. CYPRESS CREEK ROAD SUITE 410 FORT LAUDERDALE, FL 33309	X		General Counsel and Secretary	

Signatures

Curtis A. Wolfe, by Gerard A. Herlihy, Attorney in Fact 06/03/2005

__Signature of Reporting Person

Date

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).
- Stock options were granted to the filer for his role as director of the Company under the Splinx Technology Inc. 2004 Stock Option Plan.
- (1) The options vested immediately on June 2, 2005 with respect to 15,625 shares. The remaining options will vest with respect to 15,625 additional shares each on 6/24/05, 12/24/05, 6/24/06, 12/24/06, 6/24/07, 12/24/07 and 6/24/08 at which time all shares will be vested.
 - (2) The stock options were granted pursuant to the Splinx Technology Inc. 2004 Stock Option Plan.
- Stock options were granted to the filer for his role as General Counsel of the Company under the Splinx Technology Inc. 2004 Stock Option Plan. The options vested immediately on June 2, 2005 with respect to 15,625 shares. The remaining options will vest with respect to 15,625 additional shares each on 6/24/05, 12/24/05, 6/24/06, 12/24/06, 6/24/07, 12/24/07 and 6/24/08 at which time all shares will be vested.

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.