BOVIE MEDICAL CORP

Form 4/A

February 17, 2006

FORM 4

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

OMB Number:

response...

3235-0287 January 31,

0.5

if no longer subject to

Check this box

Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Expires: 2005 Estimated average burden hours per

OMB APPROVAL

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and A	Address of Reporting l	Symbol	er Name and Ticker or Tra	_	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M		BOVIE MEDICAL CORP [BVX] 3. Date of Earliest Transaction			(Check all applicable)		
(Last)	(i iist) (ii	, 2.24.0	Day/Year)		_X_ Director	10%	Owner	
9807 ASHI	LEY DRIVE	01/06/2			_X_ Officer (give below) VP	e title Othe below) of Marketing	er (specify	
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check		
			onth/Day/Year)		Applicable Line) _X_Form filed by One Reporting Person			
SEMINOLI	E, FL 64642	01/00/2	01/06/2006			Form filed by More than One Reporting Person		
(City)	(State)	(Zip) Tab	le I - Non-Derivative Sec	curities Acq	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		osed of (D) and 5) (A) or (D) Price	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 Indirect Beneficial Ownership (Instr. 4)	
Common Stock	01/06/2006		M 15,000 A	A \$ 1.125	457,976	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	ransactionDerivative ode Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option	\$ 1.125	01/06/2006		M		15,000	04/24/2001	02/18/2006	Common Stock	15,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SARON J ROBERT 9807 ASHLEY DRIVE SEMINOLE, FL 64642	X		VP of Marketing				

Signatures

/s/ Robert J.
Saron

**Signature of Person

Date

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).

Table II--Of these derivative securities, a balance of 250,000 options are held by reporting person for the benefit of former spouse

(1) pursuant to Domestic Relations Order. The 15,000 options excerised and reported were held for the benefit of former spouse under such Domestic Relations Order.

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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