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AMICUS THERAPEUTICS INC Form 3 May 30, 2007 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549 OMB

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

OMB APPROVAL

3235-0104 Number: January 31, Expires: 2005 Estimated average burden hours per response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person _* SBLENDORIO GLENN			Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol AMICUS THERAPEUTICS INC [FOLD]					
(Last)	(First)	(Middle)	05/30/2007	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)			
C/O AMICUS THERAPEUTICS, INC., 6 CEDAR BROOK DRIVE (Street) CRANBURY, NJ 08512					(Check all applicable) _X_ Director 10% O Officer 0ther (give title below) (specify below)			6. Individual or Joint/Group		
(City)	(State)	(Zip)	r	Fable I - N	on-Deriva	ativ	e Securiti	es Be	neficially Owned	
1.Title of Securi (Instr. 4)	ty			2. Amount of Beneficially ((Instr. 4)		F D o (1	Ownership form: Direct (D) r Indirect	4. Nat Owne (Instr.	-	
Common Sto	ck			13,333			D	Â		
Reminder: Report on a separate line for each class of securities benefic: owned directly or indirectly. Persons who respond to the collection of information contained in this form are not required to respond unless the form displ currently valid OMB control number.				·	SEC	2 1473 (7-02))			
	Curren	ay vana or								

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

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

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
SBLENDORIO GLENN C/O AMICUS THERAPEUTICS, INC. 6 CEDAR BROOK DRIVE CRANBURY, NJ 08512	ÂX	Â	Â	Â		
Signatures						
/s/ Douglas A. Branch, Attorney-in-Fact	05/30	/2007				
**Signature of Reporting Person	D	ate				

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.