Edgar Filing: DIKE ANTHONY C - Form 4

DIKE ANTHONY C Form 4 December 03, 2001

		II C CEC	IIDTTTEC AN	ID EVCUA	NCE C	OMMISSION				
F O R M 4	U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									
[] Check this box if	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP									
no longer Subject Fil to Section 16.	ed pursuant t Section 17(a) Sect		blic Utili	ty Hold	ing C	ompany Act	of 1935			
-	C. I	2.Issuer Name and Ticker or Trading Symbol Meridian Holdings, Inc. Ticker Symbol: MEHO								
(Last) (First 4127 W 62nd Street			Sec. No. g Person	4.Stat	1					
(Street) Los Angeles California 90043					7. In of (C c)					
 (City) (State) 	(Zip)	TABLE I		vative	 Secur	ities Acqui	R ired, Dis			
	tion Date	Code	4.Security Acqui Disposed of (D (Instr. 3, 4 &) 5)		Securi Benefi			
 			 Amou	ınt	(A) (D)	 Price	Month (Instr			
	1 1 1		1 1			1 1				
Common Stock	11/28/01	i i	23,75	0	A	\$0.040/sh	75 , 121			
	 -	 -	 			 	 			

Reminder: Report on a separate line for each class securities owned directly or indirectly. *If the form is filed by more than one reporting person, see Instruction 4(b)(v).

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FORM 4 (continued) TABLE II - Derivative Securities Acquired, Disposed of, Beneficially (e.g., puts, calls, warrants, options, convertible security)

1.Title of	2.Conver-	13.	4.Tra	n- 5	.Number o	f	6.Dat	ie	7. Title ar	nd Amount	8.P
Derivative	sion or	Trans	sact	tion	Derivati	ve	Exerc	:isable	of Under	lying	Der
Security	Exercise	Date	Code	e	Securiti	es	and		Securiti	es	Sec
(Instr. 3)	Price of	(Mon/	(Inst	r.8)	Acquired	(A) or	Expir	ation	(Instr.	3 & 4)	(In
Ī	Deriva-	Dav/	1	i	Disposed	of (D)	Date				i
		_			-	3, 4 & 5)	(Mont	h/Day/			i
	Security		I	i	,	,		ear) l			i
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Explanation of Responses:

**Intentional misstatements or omissions of facts constitute Federal /s/ Anthony C. Dik Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

**Signature of Rep

Note: File three copies of this form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are required to respond unless the form displays a currently valid OMD Number