## Edgar Filing: Langenius Sten - Form 4

Langenius Ste	en										
Form 4 January 03, 20	007										
								OMB A	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND Washington, D								OMB Number:	3235-0287		
if no longe subject to Section 16 Form 4 or Form 5 obligations may contir	Expireo longerject totion 16.m 4 orm 5igationsy continue.InstructionStruction <td>Expires: Estimated a burden hou response</td> <td colspan="2">ed average hours per</td>						Expires: Estimated a burden hou response	ed average hours per			
(Print or Type Re	esponses)										
Langenius Sten Symbol			ol	er Name and Ticker or Trading A SYSTEMS INC [ENA]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mont			Date of Earliest Transaction onth/Day/Year) 29/2006				_X_ Director 10% Owner Officer (give title Other (specify				
			mendment, Da Month/Day/Year	endment, Date Original onth/Day/Year)				below) below) 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
TORRANCE	, CA 90502							More than One Re			
(City)	(State)	(Zip) T	able I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		Code ear) (Instr. 8)	TransactionAcquired (A) or Code Disposed of (D)			Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	12/29/2006		A	2,000	A	\$ 3	3,145	D			

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

Persons who respond to the collection of information contained in this form are not 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	tionNumber of		(Month/Day/Year) vative urities uired or posed D)		Unde Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	4, and (A) (		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Langenius Sten 19850 S. MAGELLAN DR. TORRANCE, CA 90502	Х						
Signatures							
/s/ Ryan J. Nail Attorney in Fact	01						
<u>**</u> 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).

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.