#### Edgar Filing: NUTRA PHARMA CORP - Form 4

NUTRA I Form 4 March 21	PHARMA CORP											
										OMB AF	PROVAL	
FOR	UNITE	D STATES				AND EXCL on, D.C. 2054		GE COI	MMISSION	OMB Number:	3235-0	
Check this box										Expires:	January	
if no longer subject to Section 16. Form 4 or Form 5 Eiled pursuant to S				SEC	CU	N BENEFIC JRITIES the Securitie			Estimated a burden hour response	verage s per	005 0.5	
-	tions	7(a) of the l	Public	Utility I	H		any A	Act of 19	35 or Section			
(Print or Ty	pe Responses)											
	d Address of Reportin Iarold Henry	ng Person <u>*</u>	Symb	ol		and Ticker or Ti RMA CORP	c	Iss	Relationship of F uer			
(Last)	(First)	(Middle)				Transaction	[	10]	(Check	all applicable	)	
1537 NW 65TH AVENUE				th/Day/Yes 0/2012				X_ Director 10% Owner X_ Officer (give title Other (specify low) President - ReceptoPharm				
	(Street)			Amendmen Month/Day		Date Original Tear)		Ар	Individual or Join plicable Line) _ Form filed by Or	ne Reporting Per	son	
PLANTA	ATION, FL 33313							Per	Form filed by Mo	ore than One Rej	porting	
(City)	(State)	(Zip)	Т	able I - N	lor	n-Derivative Se	curiti	es Acquire	ed, Disposed of,	or Beneficiall	y Owned	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/Year)				3. 4. Securities Acquired (A) or te, if TransactionDisposed of (D) Code (Instr. 3, 4 and 5) Year) (Instr. 8) (A) or					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		7. Nature Indirect Benefici Ownersh (Instr. 4)	al 1ip
				Code V	7	Amount	(D)	Price	(Instr. 3 and 4)			
Nutra Pharma Corp	04/09/2010			S		400,000	D	\$ 0.39	3,800,000	D		
Nutra Pharma Corp	02/10/2012			А		4,000,000	A	\$ 0.0165	7,800,000	D		
Nutra Pharma Corp	10/18/2012			А		5,000,000	A	\$ 0.022	12,800,000	D		
Nutra	09/09/2013			Р		14,800,000	А	\$	27,600,000	D		

0.0025

Pharma

#### Edgar Filing: NUTRA PHARMA CORP - Form 4

Corp						
Nutra Pharma Corp	11/25/2013	А	7,400,000	Α	\$ 0.014 35,000,000	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>			Relationships				
L O	Director	10% Owner	Officer	Other			
Rumph Harold Henry 1537 NW 65TH AVENUE PLANTATION, FL 33313	Х		President - ReceptoPharm				

# Signatures

/s/ Harold Henry Rumph 03/20/2014 \*\*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.

#### Edgar Filing: NUTRA PHARMA CORP - Form 4

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.