# FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL			
OMB	3235-		
Number:	0104		
Estimated average			
burden hours pe			
response	0.5		

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

**SECURITIES** 

Statem (Month	2. Date of Event Requiring Statement (Month/Day/Year) – 08/16/2005		~	ADVANCED 3-D ULTRASOUND SERVICES INC					
			Person(s) to 1	Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
			X Director X Officer (g title below)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
	Ta	ble I	- Non-Derivat	ive Securiti	es Bene	ficially	Owned		
1.Title of Security (Instr. 4) 2.				3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership				
OMMON STOCK 1,379,50		00	D						
MON STOCK 500,000			I	CUSTODIAN FOR MINOR MICHELE PRENTICE					
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  SEC 1473 (7-02)  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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security 2. Date Exercisable		3. Tit Secur Deriv	ele and Amount of rities Underlying vative Security	4. Conversion	5. Own Forn	vnership 6. Be rm of (Ir	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
ate	Expiration Date		Amount or Numb	Derivative Security	Dire	rity: ct (D) direct			
	each class espond to pond unle  Date Exend Expirati	Statement (Month/Day/Year 08/16/2005  Ta  2. A Ber (Ins)  1,3  500  each class of securities espond to the collect pond unless the following the collection of the	Statement (Month/Day/Year) 08/16/2005  Table I  2. Amour Beneficial (Instr. 4)  1,379,50  500,000  each class of securities beneficial to the collection pond unless the form districts Beneficially Owned Date Exercisable and Expiration Date Month/Day/Year)  3. Tit Securities Beneficially Owned Derivative Beneficially Owned  Securities Beneficially Owned Derivative Beneficially Owned  The Exercisable and Expiration Date Month/Day/Year)	Statement (Month/Day/Year) 08/16/2005  Table I - Non-Derivat  2. Amount of Securities Beneficially Owned (Instr. 4)  1,379,500  500,000  each class of securities beneficially owned direspond to the collection of information pond unless the form displays a current of the collection of information pond unless the form displays a current of Expiration Date  3. Title and Amount of Securities Underlying	Statement (Month/Day/Year) 08/16/2005  ADVANCED 3-D ULT [ADVU]  4. Relationship of Reporting Person(s) to Issuer (Check all applicable)	Statement (Month/Day/Year) 08/16/2005  ADVANCED 3-D ULTRASO [ADVU]  4. Relationship of Reporting Person(s) to Issuer (Check all applicable)X DirectorX Officer (give Other (specify below) PRESIDENT  Table I - Non-Derivative Securities Bene  2. Amount of Securities Beneficially Owned (Instr. 4)  2. Amount of Securities Beneficially Owned (Instr. 4)  Ownership Form: Direct (D) or Indirect (I) (Instr. 5)  1,379,500  D  500,000  I CUST MICH  each class of securities beneficially owned directly or indirectly.  espond to the collection of information contained in this forpond unless the form displays a currently valid OMB cont  orities Beneficially Owned (e.g., puts, calls, warrants, options, collection of the collection of the collection of contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form displays a currently valid OMB contained in this forpond unless the form di	Statement (Month/Day/Year) 08/16/2005  ADVANCED 3-D ULTRASOUND S [ADVU]  4. Relationship of Reporting Person(s) to Issuer (Check all applicable) ————————————————————————————————————		

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address		10% Owner	Officer	Other	
PRENTICE MIKE					
7944 9TH AVENUE SOUTH ST PETERSBURG, FL 33707	X	X	PRESIDENT		

## **Signatures**

MIKE PRENTICE	09/23/2005
**Signature of Reporting Person	Date

## **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.