

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

OMB Number: Estimated average burden hours per response...

OMB APPROVAL

3235-

0104

0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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

(Print or Type Responses)								
1. Name and Address of Reporting Person * Button Diane S	2. Date of Eve Statement (Month/Day/Y	•	~	3. Issuer Name and Ticker or Trading Symbol Cactus Ventures, Inc. [none]				
(Last) (First) (Middle) 251 JEANELL DR, SUITE 3		4. Relations Person(s) to				5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) CARSON CITY, NV 89703				all applicable) ve 10% O Other (below) secretary/Treas	wner specify Fili	Individual or Joint/Group ing(Check Applicable Line) _Form filed by One Reporting Person Form filed by More than One Reporting son		
(City) (State) (Zip)	ı	Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)			nt of Securities Illy Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)		Beneficial	
Common Stock		20,000,000		D				
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)								
	Date Exercisable	• • • • • • • • • • • • • • • • • • • •			5.		6. Nature of Indirect	
(Instr. 4) 2. Date Exercisable and Expiration Da (Month/Day/Year)		Secu	rities Underlying vative Security	Conversion or Exercise Price of	on Owners Form of Derivat	ship Bend f (Inst	Beneficial Ownership (Instr. 5)	
	te Expirat tercisable Date	Title	Amount or Numb of Shares	Derivative Security	Direct (or Indir (I) (Instr. 5	(D) rect		
Reporting Owners								

Relationships

President/Secretary/Treasurer

Other

Director 10% Owner Officer

X

Signatures

Button Diane S

/s/Diane S. Button	02/06/2007		
**Signature of Reporting Person	Date		

Reporting Owner Name / Address

251 JEANELL DR, SUITE 3

CARSON CITY, NV 89703

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.