

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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)		CE · B	2 7	NT	r: 1	1' C 1 1		
Name and Address of Report Person * Lawrence Nathan	Staten (Mont			3 3. Issuer Name and Ticker or Trading Symbol PRESSURE BIOSCIENCES INC [PBIO]				
(Last) (First) (I 1 WEST MAIN STREET	Middle)	5/2006	4. Relationship of Person(s) to Issuer				5. If Amendment, Date Original Filed(Month/Day/Year) 6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person	
(Street) NEW MARKET, MD 2117	74		Directory D	ctor cer (give below P Marketing				
(City) (State)	(Zip)	Table	e I - Non-Deri	vative Sec	urities B	eneficially O	wned	
1.Title of Security (Instr. 4)			2. Amount of Securities 3. Own Instr. 4) Form (D) c Indir (Instr.		rship Ow Direct (Ins	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Pressure BioSciences, Inc.			2,283)			
Reminder: Report on a separate		ss of securities	•	-			SEC 1473 (7-02)	
Reminder: Report on a separate Persons not requi number.	who respond t red to respond	ss of securities to the collect d unless the	tion of informa form displays	ation conta a currently	ined in th y valid OM	is form are //B control		
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Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Lawrence Nathan 1 WEST MAIN STREET NEW MARKET, MD 21174			VP Marketing & Bus Development			

Signatures

/s/ NATHAN LAWRENCE	03/08/2006
**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).
- (1) Exercisable over three years (33% at the end of each year).

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.