SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person* <u>Syed Fahad M</u>	2. Date of Event Requiring Staten (Month/Day/Year 05/20/2005	nent 1	3. Issuer Name and Ticker or Trading Symbol <u>NETFABRIC HOLDINGS, INC</u> [OTCBB:NFBH]					
(Last) (First) (Middle) C/O UCA COMPUTER SYSTEMS 3 STEWART COURT			4. Relationship of Reporting Perso (Check all applicable) X Director Officer (give title	on(s) to Issue 10% Owne Other (spe	r (Mo	nth/Day/Year)	ate of Original Filed t/Group Filing (Check	
(Street) DENVILLE NJ 07834 (City) (State) (Zip)			below)	below)	App	licable Line) K Form filed b	y One Reporting Person y More than One	
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			Amount of Securities eneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership Instr. 5)		
Common Stock, \$.001 par value			4,819,231	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)	2. Date Exerc Expiration Da (Month/Day/	ate	3. Title and Amount of Secur Underlying Derivative Securi		4. Conversion or Exercise Price of	Form:	(Instr. 5)	
Explanation of Responses:	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		

/s/ Fahad Syed

** Signature of Reporting Person Date

06/24/2005

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

 * 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.

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 Number.