The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

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

Notice of Exempt Offering of Securities

OMB APPROVAL			
OMB Number:	3235- 0076		
Estimated average burden			
hours per response:	4.00		

1. Issuer's Identity

CIK (Filer ID Numl	per) Previous Names	None	Entity Type
<u>0001368514</u>		ISITION VI, INC	V. Corporation
		ition VI, Inc.	X Corporation
ADMA BIOLOGICS, INC.	K&K ACquis	111011 VI, 111C.	Limited Partnership Limited Liability Company
Jurisdiction of			General Partnership
Incorporation/Organiz	zation		Business Trust
DELAWARE			Other (Specify)
Year of Incorporation	on/Organization		Olice (Opeeny)
X Over Five Years Ago			
Within Last Five Years (Sp	ecify Year)		
Yet to Be Formed			
2. Principal Place of Business	and Contact Information		
Name of	Issuer		
ADMA BIOLOGICS, INC.			
Street Ad	ldress 1	Sti	reet Address 2
65 COMMERCE WAY			
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
HACKENSACK	NEW JERSEY	07601	(201) 478-5552
3. Related Persons			
Last Name		t Name	Middle Name
Grossman	Adam	S Address D	
Street Address 1		Address 2	
C/O ADMA BIOLOGICS, IN			
City HACKENSACK	State/Prov NEW JERSEY	ince/Country 076	ZIP/PostalCode
			01
Relationship: X Executive Of	ficer X Director Promote	2r	
Clarification of Response (if N	ecessary):		
Last Name	Firs	t Name	Middle Name
Elms	Steven	А.	
Street Address 1	Street	Address 2	
C/O ADMA BIOLOGICS, IN	C. 65 COMMERCE	T . TA T 7	
-	C. 65 COMMERCE	WAY	

07601

Clarification of Response (if Necessary):

Relationship: Executive Officer X Director Promoter

NEW JERSEY

HACKENSACK

Last Name	First Name	Middle Name
Grossman	Jerrold	В.
Street Address 1	Street Address 2	
C/O ADMA BIOLOGICS, INC.	65 COMMERCE WAY	
City	State/Province/Country	ZIP/PostalCode
HACKENSACK	NEW JERSEY	07601
Relationship: Executive Officer <i>X</i>	K Director Promoter	
Clarification of Response (if Necessa	ary):	
Last Name	First Name	Middle Name
Guiheen	Lawrence	Р.
Street Address 1	Street Address 2	
C/O ADMA BIOLOGICS, INC.		
City	State/Province/Country	ZIP/PostalCode
HACKENSACK	NEW JERSEY	07601
Relationship: Executive Officer <i>X</i>	K Director Promoter	
Clarification of Response (if Necessa	ary):	
Last Name	First Name	Middle Name
Richman	Eric	I.
Street Address 1	Street Address 2	
C/O ADMA BIOLOGICS, INC.		
City	State/Province/Country	ZIP/PostalCode
HACKENSACK	NEW JERSEY	07601
Relationship: Executive Officer <i>X</i>	K Director Promoter	
Clarification of Response (if Necessa	ary):	
Last Name	First Name	Middle Name
Goldstein	Dov	А.
Street Address 1	Street Address 2	
C/O ADMA BIOLOGICS, INC.	65 COMMERCE WAY	
City	State/Province/Country	ZIP/PostalCode
HACKENSACK	NEW JERSEY	07601
Relationship: Executive Officer <i>X</i>	C Director Promoter	
Clarification of Response (if Necessa	ary):	
Last Name	First Name	Middle Name
Fong	Bryant	Е.
Street Address 1	Street Address 2	
C/O ADMA BIOLOGICS, INC.	65 COMMERCE WAY	
City HACKENSACK	State/Province/Country NEW JERSEY	ZIP/PostalCode 07601
Relationship: Executive Officer 3		0/001
Actationship . Executive Officer 2		
Clarification of Response (if Necessa	ary):	
Last Name	First Name	Middle Name
Mond	James	
Street Address 1	Street Address 2	
C/O ADMA BIOLOGICS, INC.	65 COMMERCE WAY State/Province/Country	ZIP/PostalCode
City HACKENSACK	NEW JERSEY	07601
		07.001

Relationship: X Executive Officer Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Lenz	Brian	
Street Address 1	Street Address 2	
C/O ADMA BIOLOGICS, INC.	65 COMMERCE WAY	
City	State/Province/Country	ZIP/PostalCode
HACKENSACK	NEW JERSEY	07601
Relationship: X Executive Officer	Director Promoter	

Clarification of Response (if Necessary):

4. Industry Group

Agriculture	Health Care	Retailing
Banking & Financial Services	Biotechnology	Restaurants
Commercial Banking	Health Insurance	Technology
Insurance Insurating	Hospitals & Physicians	Computers
Investing Investment Banking	Pharmaceuticals	Telecommunications
Pooled Investment Fund	X Other Health Care	Other Technology
Is the issuer registered as an investment company under the Investment Company Act of 1940?	Manufacturing Real Estate Commercial	Travel Airlines & Airports Lodging & Conventions
Yes No	Construction	Tourism & Travel Services
Other Banking & Financial Services	REITS & Finance	Other Travel
Business Services	Residential	Other
Energy	Other Real Estate	
Coal Mining		
Electric Utilities		
Energy Conservation		
Environmental Services		
Oil & Gas		
Other Energy		
5. Issuer Size		

OR **Revenue Range** Aggregate Net Asset Value Range No Revenues No Aggregate Net Asset Value \$1 - \$1,000,000 \$1 - \$5,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$5,000,001 -\$25,000,001 - \$50,000,000 \$25,000,000 \$25,000,001 -\$50,000,001 - \$100,000,000 \$100,000,000 Over \$100,000,000 Over \$100,000,000 X Decline to Disclose Decline to Disclose Not Applicable Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii) Rule 504 (b)(1)(iii)	X Rule 506 Securities Act S Investment Cor	Section 4(5) npany Act Section 3(c)	
	Section 3(c)(1)		
	Section 3(c)(2)		
	Section 3(c)(3)		
	Section 3(c)(4)		
	Section 3(c)(5)		
	Section 3(c)(6)		
	Section 3(c)(7)		
7. Type of Filing			
X New Notice Date of First Sale 2012-12-21 Amendment	First Sale Yet to O	ccur	
8. Duration of Offering			
Does the Issuer intend this offering to last more	than one year? Ye	es X No	
9. Type(s) of Securities Offered (select all that a	pply)		
Equity		Pooled Investment Fund Interests	
Debt		Tenant-in-Common Securities	
X Option, Warrant or Other Right to Acquire A Security to be Acquired Upon Exercise of Op Other Right to Acquire Security	tion Warrant or	Mineral Property Securities Other (describe)	
10. Business Combination Transaction			
Is this offering being made in connection with a a merger, acquisition or exchange offer?	u business combinatio	on transaction, such as Yes X No	
Clarification of Response (if Necessary):			
11. Minimum Investment			
Minimum investment accepted from any outside	e investor \$0 USD		
12. Sales Compensation			
Recipient	Recipier	nt CRD Number X None	
(Associated) Broker or Dealer X None	(Associa	tted) Broker or Dealer CRD Number X Nor	ie
Street Address 1		Street Address 2	
City State(s) of Solicitation (select all that apply) Check "All States" or check individual States		wince/Country n/non-US	ZIP/Postal Code
13. Offering and Sales Amounts			
Total Offering Amount \$0 USD or Indef	inito		
Total Offering Amount\$0 USD orIndefTotal Amount Sold\$0 USD	linte		
Total Remaining to be Sold \$0 USD or Indef	inite		
Clarification of Response (if Necessary):			
Warrant to purchase 25,000 shares issued to lend	der as partial conside	ration under loan agreement. No separate ca	ash consideration
received.		auton under four ugreement, two sepurate to	

received.

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering.

Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$0 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
ADMA BIOLOGICS, INC.	/s/ Adam S. Grossman	Adam S. Grossman	Chief Executive Officer	2013-01-07

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a

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result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.