

AMBROSIO COSTANTINO
 Form 3/A
 April 17, 2003

SEC 1473 (09-02) 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 control number.

FORM 3	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549	OMB APPROVAL
	INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940	OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response. . . 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person* Ambrosio Costantino (Last) (First) (Middle) care of Vicuron Pharmaceuticals Inc. 455 South Gulph Road, Suite 305 (Street) King of Prussia PA 19406 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 2/28/03 3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)	4. Issuer Name and Ticker or Trading Symbol Versicor Inc. VERS (subsequently changed to Vicuron Pharmaceuticals Inc. (Nasdaq: MICU) 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) Chief Manufacturing Officer	6. If Amendment, Date of Original (Month/Day/Year) 03/06/2003 7. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
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Table I - Non-Derivative Securities Beneficially Owned

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1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common stock	141,600	D	

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Peter T. Healy, Esq. (by power of attorney)

** Signature of Reporting Person

4/16/03

Date

* 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.

<http://www.sec.gov/divisions/corpfin/forms/form3.htm>

Last update: 09/03/2002