

STREICHER MOBILE FUELING INC
 Form 4
 March 09, 2005

FORM 4

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN 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

(Print or Type Responses)

1. Name and Address of Reporting Person *
FRENKEL LEONID

2. Issuer Name and Ticker or Trading Symbol
STREICHER MOBILE FUELING INC [FUEL]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
401 CITY AVENUE, SUITE 800
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
03/07/2005

____ Director
 ____ Officer (give title below) Other (specify below)
 No longer 10% owner

BALA CYNWYD, PA 19004

(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--------------------------------------|--|--------------------------------|---|---|--|---|
| | | | | (A) or (D) Price | | | |
| Common Stock | 03/07/2005 | 03/07/2005 | X | 7,125 A \$ 1 | 7,125 | I (1) | By Triage Capital Management L.P. |
| Common Stock | 03/07/2005 | 03/07/2005 | S | 7,125 D \$ 3.06 | 0 | I (1) | By Triage Capital Management L.P. |
| Common Stock | 03/07/2005 | 03/07/2005 | S | 2,500 D \$ 3.29 | 0 | I (1) | By Triage Capital Management L.P. |

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| | | | | | | | | | |
|--------------|------------|------------|---|--------|---|---------|--------|------------------|--------------------------------------|
| Common Stock | 03/07/2005 | 03/07/2005 | X | 14,100 | A | \$ 1 | 14,100 | I ⁽¹⁾ | By Triage Capital Management B, L.P. |
| Common Stock | 03/07/2005 | 03/07/2005 | S | 14,100 | D | \$ 3.06 | 0 | I ⁽¹⁾ | By Triage Capital Management B, L.P. |
| Common Stock | 03/07/2005 | 03/07/2005 | S | 3,250 | D | \$ 3.29 | 0 | I ⁽¹⁾ | By Triage Capital Management B, L.P. |
| Common Stock | 03/07/2005 | 03/07/2005 | X | 53,775 | A | \$ 1 | 53,775 | I ⁽¹⁾ | By Triage Offshore Fund, Ltd. |
| Common Stock | 03/07/2005 | 03/07/2005 | S | 53,775 | D | \$ 3.06 | 0 | I ⁽¹⁾ | By Triage Offshore Fund, Ltd. |
| Common Stock | 03/07/2005 | 03/07/2005 | S | 19,250 | D | \$ 3.29 | 0 | I ⁽¹⁾ | By Triage Offshore Fund, Ltd. |

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

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.

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(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | |
|--|--|--------------------------------------|--|--------------------------------|---|--|---|--------------|----------------------------|
| | | | | Code | V (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Common Stock Warrants (right to buy) | \$ 1 | 03/07/2005 | 03/07/2005 | X | 7,125 | 08/29/2003 | 08/28/2008 | Common Stock | 7,125 |

| | | | | | | | | | |
|--|------|------------|------------|---|--------|------------|------------|-----------------|--------|
| Common Stock Warrants (right to buy) | \$ 1 | 03/07/2005 | 03/07/2005 | X | 14,100 | 08/29/2003 | 08/28/2008 | Common Stock | 14,100 |
| Common Stock Warrants (right to buy) | \$ 1 | 03/07/2005 | 03/07/2005 | X | 53,775 | 08/29/2003 | 08/28/2008 | Common Stock | 53,775 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|---|---------------|-----------|---------|---------------------|
| | Director | 10% Owner | Officer | Other |
| FRENKEL LEONID 401 CITY AVENUE, SUITE 800 BALA CYNWYD, PA 19004 | | | | No longer 10% owner |

Signatures

/s/ Leonid
Frenkel

03/09/2005

**Signature of
Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(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).

Leonid Frenkel ("Mr. Frenkel") is the manager of a limited liability company that acts as general partner to a general partner of both Triage Capital Management L.P. and Triage Capital Management B, L.P. Mr. Frenkel acts as the manager of a limited liability company (1) that acts as general partner to an investment manager of Triage Offshore Fund, Ltd. The reporting person disclaims beneficial ownership of the securities reported herein except to the extent of his pecuniary interest therein. This filing shall not be deemed an admission, for Section 16 or otherwise, that the reporting person is the beneficial owner of any of the securities covered by this filing.

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.