FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number: 3235-0104							
Estimated average burden							
hours per response:	0.5						

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

Name and Address of Reporting Person* Janus Jeffrey		2. Date of Ever Requiring State (Month/Day/Ye	ement	3. Issuer Name and Ticker or Trading Symbol BTHC III INC. [BTHC]								
(Last)	(First)	(Middle)	12/28/2006	,	(Check all app	son(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)				
2595 JASON	COURT				Direct X Office below	,	10% Owner Other (specify		6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street) OCEANSIDE	CA	92056			500	President	,		X	X Formfiled by One Reporting Person Formfiled by More than One Reporting Person		
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)				2. Amount of Beneficially C	Securities wned (Instr. 4)			Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock				2,16	0,807	D						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable an Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date Expiration Date Expiration Date		ate	and 3. Title and Amount of Securitie: Underlying Derivative Security (I			ty (Instr. Conver		Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Expiration Date	Title		Amount or Number of Shares	Price of Derivative Security		Direct (D) or Indirect (I) (Instr. 5)			
Stock Option			01/02/2007	11/17/2017	7 com	non stock	106,000	1		D		

Explanation of Responses:

Jeffrey Janus /s/

01/02/2007

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).