FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

APPROVAI

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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

Molyhter Firdauz			2. Date of Event Requiring Statement (Month/Day/Year) 04/02/2024	l	Name and Ticker or Trading NPHARMACEUTI	ading Symbol UTICALS INC [TTNP]		
(Last)	(First)	(Middle)		Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)	
TRIDENT COURT, 1 OAKCROFT ROAD CHESSINGTON			X	Director Officer (give title below)	10% Owner Other (specify below)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Perso Form filed by More than One Repoi		
(Street) SURREY	X0	KT9 1BD					Person	y More than One Reporting
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	` ` '	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	l '
Common Stock	0(1)	D	

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

1. Title of Derivative Security (Instr. 4)	1		Derivative Security (Instr. 4)		Conversion or Exercise (Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	ivative (Instr. 5)	

Explanation of Responses:

1. No securities are beneficially owned.

/s/ Firdauz Edmin Bin Mokhtar 04/05/2024

** 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.

^{*} 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).