FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB A	OMB APPROVAL							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Coles L. Stephen		2. Date of Event Requiring Statem Month/Day/Year 02/22/2011	nent	3. Issuer Name and Ticker or Trading Symbol Genesis Biopharma, Inc [GNBP.OB]								
(Last) (First) (Middle) 817 LEVERING AVENUE		(Middle)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)			
UNIT 8						Officer (give title below)	Other (spe below)	cify		dividual or Joint cable Line)	/Group Filing (Check	
(Street) LOS ANGELES	CA	90024							X	•	y One Reporting Person y More than One erson	
(City)	(State)	(Zip)										
		T	able I - Non	-Derivati	ive Se	ecurities Beneficiall	y Owned					
1. Title of Secur	ity (Instr. 4)	ī	able I - Non	2.	. Amou	ecurities Beneficiall int of Securities ally Owned (Instr. 4)	y Owned 3. Ownersh Form: Direct or Indirect (Instr. 5)	ct (D)	4. Nati (Instr.		Beneficial Ownership	
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Title of Secur Title of Derivation	,	(e. ý	Table II - D	Derivative ls, warrantisable and	Seconts, o	int of Securities ally Owned (Instr. 4) urities Beneficially	3. Ownersh Form: Direct or Indirect (Instr. 5) Owned securitie	ct (D) (I)	sion		Beneficial Ownership 6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

No securities are beneficially owned.

<u>/s/ L. Stephen Coles</u> <u>03/24/2011</u>

** 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).