

KNOLL FRED
Form 3
October 29, 2009

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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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

(Print or Type Responses)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â EUROPA INTERNATIONAL INC			(Month/Day/Year) 10/19/2009	Trist Holdings, Inc. [LBAN]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer		
C/O KNOLL CAPITAL MANAGEMENT, L.P., Â 1114 AVENUE OF THE AMERICAS, 45TH FL			(Check all applicable)		
(Street)			<input type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below)		
NEW YORK, Â NY Â 10036			5. If Amendment, Date Original Filed(Month/Day/Year)		
(City)	(State)	(Zip)	6. Individual or Joint/Group Filing(Check Applicable Line)		
			<input type="checkbox"/> Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person		

Table I - Non-Derivative Securities Beneficially Owned

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 ⁽¹⁾	39,655,628	D	Â

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

SEC 1473 (7-02)

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.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial Ownership
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(Month/Day/Year)	Derivative Security (Instr. 4)	or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
EUROPA INTERNATIONAL INC C/O KNOLL CAPITAL MANAGEMENT, L.P. 1114 AVENUE OF THE AMERICAS, 45TH FL NEW YORK, NY 10036	^	^ X	^	^
Knoll Capital Management, LP 1114 AVENUE OF THE AMERICAS 45TH FLOOR NEW YORK, NY 10036	^	^ X	^	^
KNOLL FRED C/O KNOLL CAPITAL MANAGEMENT, L.P. 1114 AVENUE OF THE AMERICAS, 45TH FL NEW YORK, NY 10036	^	^ X	^	^

Signatures

/s/ By: Fred Knoll, President of Knoll Capital Management, LP Investment Manager of the Reporting Person		10/28/2009
Signature of Reporting Person		Date
/s/ By: Fred Knoll, President of Knoll Capital Management, LP		10/28/2009
Signature of Reporting Person		Date
/s/ By: Fred Knoll		10/28/2009
Signature of Reporting Person		Date

Explanation of Responses:

- * 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).
- These shares are owned directly by Europa International, Inc. Knoll Capital Management, L.P., as Investment Manager of Europa International, Inc. and Fred Knoll, as President of Knoll Capital Management, L.P. each disclaim beneficial ownership of the shares held
- (1) by Europa International, Inc. in the Issuer except to the extent of their pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership by either Knoll Capital Management, L.P. or Fred Knoll of all of the reported shares for purposes of Section 16 or for any other purpose.

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.