FORM 4

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

OMB APPROVAL							
MB Number:	3235-0287						
stimated average burden							
ours per response	0.5						

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 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	es)																
Name and Address of Reporting Person CUNNINGHAM BLAIR GRAEME					2. Issuer Name and Ticker or Trading Symbol Coda Octopus Group, Inc. [CDOC.OB]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Chief Technology Officer 6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Last) (First) (Middle) C/O CODA OCTOPUS GROUP, INC., 164 WEST 25TH STREET, 6TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 08/14/2008													
(Street) NEW YORK, NY 10001				4. If Amendment, Date Original Filed(Month/Day/Year)														
(Cit	y)	(State)	(Zip)			7	Гable	I - Non-De	rivativ	e Securiti	ies Acqui	ired, Dis	pose	d of, or Ben	eficially Owr	ied		
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, if any (Month/Day/Year			Coo (Ins	Transaction de str. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Owned Following Reported Transaction(s)				6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
			(Wolldin Day) 1 car)			Code V		Amount (A) or		(Instr. 3 and 4)				or Indirect (I) (Instr. 4)				
Common	Stock, \$0.	.001 par value										522,940	5			I (1)	See Footnote	
Reminder:	Report on a	separate line for eac	ch class of securities	benefici	ally	ownec	l direc	ctly or indir	ectly.									
								cont	ained	in this fo	orm are	not req	uire	n of inform d to respoi ontrol nun	nd unless th		1474 (9-02)	
								cquired, Di				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	4. 5. Num			vative rities ired or osed	mber 6. Date Exercisable and Expiration Date (Month/Day/Year) of Settles red (Ir				erlying	ing Derivative Security		f 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownershi Form of Derivative Security: Direct (D) or Indirect				
				Code	v	(A)	(D)	Date Exercisabl		oiration ee	Title	Amo or Num of Sl	ber					
Options	\$ 1.3	08/14/2008		A		0		<u>(2)</u>	08	14/2013	Comm	17.0	000	\$ 1.3	1.3	D		
Options	\$ 1.3	08/14/2008		A		0		11/01/20	08	14/2013	Comm	110	500	\$ 1.3	1.3	D		
Options	\$ 1.3	08/14/2008		A		0		11/01/20	09 08	/14/2013	Comm		500	\$ 1.3	1.3	D		
Options	\$ 1.00							<u>(2)</u>	05	01/2011	Comm		,000		0	D		
Warrants	\$ 1.30							09/20/20	07 05	/05/2012	Comm		000		0	I	Softwor Busines Systems Solution Ltd.	
Warrants	\$ 1.70							09/20/20	07 05	05/2012	Comm	251	000		0	I	Softwor Busines Systems Solution	

Reporting Owners

D (O V ())	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
CUNNINGHAM BLAIR GRAEME C/O CODA OCTOPUS GROUP, INC. 164 WEST 25TH STREET, 6TH FLOOR NEW YORK, NY 10001			Chief Technology Officer						

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).
- (1) Out of this amount, the current acquired shares plus 228,477 shares are directly and beneficially owned by the Reporting Person. Furthermore, the remaining 282,787 shares are indirectly owned through Softworks Business Systems Solutions Ltd. of which entity the reporting person acts as a Director.
- (2) Immediate

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, \textit{see}\ Instruction\ 6 for procedure.$

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.