

BIOTIME INC  
Form SC 13D/A  
April 20, 2006

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**SECURITIES AND EXCHANGE COMMISSION  
WASHINGTON, D.C. 20549**

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**SCHEDULE 13D**

Under the Securities Exchange Act of 1934

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**(Amendment No. 1)**  
**BIOTIME INC.**  
(Name of Issuer)

**Common Shares, no par value**  
(Title of class of securities)

**09066L105**  
(CUSIP number)

Steven Bayern  
26 West Broadway #1004  
Long Beach, NY 11561  
(516) 431-2121

(Name, address and telephone number of person authorized to receive notices and communications)

April 12, 2006

(Date of event which requires filing of this statement)

If the filing person has previously filed a statement on Schedule 13G to report the acquisition which is the subject of this Schedule 13D, and is filing this schedule because of Rule 13d-1(b)(3) or (4), check the following box .

*Note:* When filing this statement in paper format, six copies of this statement, including exhibits, should be filed with the Commission. *See* Rule 13d-1(a) for other parties to whom copies are to be sent.

(Continued on following page(s))  
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<b>1</b>	NAME OF REPORTING PERSON: Cyndel & Co., Inc. S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: _____**		
<b>2</b>	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP:	(a) <input checked="" type="checkbox"/>	(b) <input type="checkbox"/>
<b>3</b>	SEC USE ONLY		
<b>4</b>	SOURCE OF FUNDS: WC		
<b>5</b>	CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e):	<input type="checkbox"/>	
<b>6</b>	CITIZENSHIP OR PLACE OF ORGANIZATION: New York		
NUMBER OF SHARES	<b>7</b>	SOLE VOTING POWER	940,476
BENEFICIALLY OWNED BY	<b>8</b>	SHARED VOTING POWER:	0
EACH REPORTING	<b>9</b>	SOLE DISPOSITIVE POWER:	940,476
PERSON WITH	<b>10</b>	SHARED DISPOSITIVE POWER:	0
<b>11</b>	AGGREGATE AMOUNT BENEFICIALLY OWNED BY REPORTING PERSON:		940,476
<b>12</b>	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES:		<input type="checkbox"/>
<b>13</b>	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11):		4.1-%
<b>14</b>	TYPE OF REPORTING PERSON:	CO	

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<b>1</b>	NAME OF REPORTING PERSON: Steven Bayern. S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: **		
<b>2</b>	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP:	(a) <input checked="" type="checkbox"/>	(b) <input type="checkbox"/>
<b>3</b>	SEC USE ONLY		
<b>4</b>	SOURCE OF FUNDS: PF		
<b>5</b>	CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e):	<input type="checkbox"/>	
<b>6</b>	CITIZENSHIP OR PLACE OF ORGANIZATION: United States		
NUMBER OF SHARES	<b>7</b>	SOLE VOTING POWER:	0
BENEFICIALLY OWNED BY	<b>8</b>	SHARED VOTING POWER:	2, 013,656
EACH REPORTING	<b>9</b>	SOLE DISPOSITIVE POWER:	0
PERSON WITH	<b>10</b>	SHARED DISPOSITIVE POWER:	2,0.13,656
<b>11</b>	AGGREGATE AMOUNT BENEFICIALLY OWNED BY REPORTING PERSON:		2,013,656
<b>12</b>	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES:		<input type="checkbox"/>
<b>13</b>	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11):		8.6%
<b>14</b>	TYPE OF REPORTING PERSON:	IN	

CUSIP No. 09066L105		<b>13D</b>	Page 4 of 14 Pages
<b>1</b>	NAME OF REPORTING PERSON: Cynthia Bayern. S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: **		
<b>2</b>	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP:	(a) <input checked="" type="checkbox"/>	(b) <input type="checkbox"/>
<b>3</b>	SEC USE ONLY		
<b>4</b>	SOURCE OF FUNDS: PF		
<b>5</b>	CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e):	<input type="checkbox"/>	
<b>6</b>	CITIZENSHIP OR PLACE OF ORGANIZATION: United States		
NUMBER OF SHARES	<b>7</b>	SOLE VOTING POWER:	0
BENEFICIALLY OWNED BY	<b>8</b>	SHARED VOTING POWER:	355,700
EACH REPORTING	<b>9</b>	SOLE DISPOSITIVE POWER:	0
PERSON WITH	<b>10</b>	SHARED DISPOSITIVE POWER:	355,700
<b>11</b>	AGGREGATE AMOUNT BENEFICIALLY OWNED BY REPORTING PERSON:		355,700
<b>12</b>	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES:		<input type="checkbox"/>
<b>13</b>	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11):		1.6%
<b>14</b>	TYPE OF REPORTING PERSON:	IN	

CUSIP No. 09066L105		<b>13D</b>	Page 5 of 14 Pages
<b>1</b>	NAME OF REPORTING PERSON: Patrick Kolenick. S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON:		
<b>2</b>	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP:	(a) <input checked="" type="checkbox"/>	(b) <input type="checkbox"/>
<b>3</b>	SEC USE ONLY		
<b>4</b>	SOURCE OF FUNDS: PF		
<b>5</b>	CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e):	<input type="checkbox"/>	
<b>6</b>	CITIZENSHIP OR PLACE OF ORGANIZATION: United States		
NUMBER OF SHARES	<b>7</b>	SOLE VOTING POWER:	80,100
BENEFICIALLY OWNED BY	<b>8</b>	SHARED VOTING POWER:	1,383,670
EACH REPORTING	<b>9</b>	SOLE DISPOSITIVE POWER:	80,100
PERSON WITH	<b>10</b>	SHARED DISPOSITIVE POWER:	1,383,670
<b>11</b>	AGGREGATE AMOUNT BENEFICIALLY OWNED BY REPORTING PERSON:		1,463,770
<b>12</b>	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES:		<input type="checkbox"/>
<b>13</b>	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11):		6.3%
<b>14</b>	TYPE OF REPORTING PERSON:	IN	

CUSIP No. 09066L105		<b>13D</b>	Page 6 of 14 Pages
<b>1</b>	NAME OF REPORTING PERSON: BN Ventures, LLC S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: _____		
<b>2</b>	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP:	(a) <input checked="" type="checkbox"/>	(b) <input type="checkbox"/>
<b>3</b>	SEC USE ONLY		
<b>4</b>	SOURCE OF FUNDS: WC, AF		
<b>5</b>	CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e):	<input type="checkbox"/>	
<b>6</b>	CITIZENSHIP OR PLACE OF ORGANIZATION: New York*		
NUMBER OF SHARES	<b>7</b>	SOLE VOTING POWER:	274,286
BENEFICIALLY OWNED BY	<b>8</b>	SHARED VOTING POWER:	0
EACH REPORTING	<b>9</b>	SOLE DISPOSITIVE POWER:	274,286
PERSON WITH	<b>10</b>	SHARED DISPOSITIVE POWER:	0
<b>11</b>	AGGREGATE AMOUNT BENEFICIALLY OWNED BY REPORTING PERSON:		274,286
<b>12</b>	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES:		<input type="checkbox"/>
<b>13</b>	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11):		1.2%
<b>14</b>	TYPE OF REPORTING PERSON:	OO	

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<b>1</b>	NAME OF REPORTING PERSON: SJCMB Family Limited Partnership S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON:		
<b>2</b>	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP:	(a) <input checked="" type="checkbox"/>	(b) <input type="checkbox"/>
<b>3</b>	SEC USE ONLY		
<b>4</b>	SOURCE OF FUNDS: WC, AF		
<b>5</b>	CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e):	<input type="checkbox"/>	
<b>6</b>	CITIZENSHIP OR PLACE OF ORGANIZATION: New York		
NUMBER OF SHARES	<b>7</b>	SOLE VOTING POWER:	74,200
BENEFICIALLY OWNED BY	<b>8</b>	SHARED VOTING POWER:	0
EACH REPORTING	<b>9</b>	SOLE DISPOSITIVE POWER:	74,200
PERSON WITH	<b>10</b>	SHARED DISPOSITIVE POWER:	0
<b>11</b>	AGGREGATE AMOUNT BENEFICIALLY OWNED BY REPORTING PERSON:		74,200
<b>12</b>	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES:		<input type="checkbox"/>
<b>13</b>	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11):		0.3%
<b>14</b>	TYPE OF REPORTING PERSON:	PN	