

**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

(Print or Type Responses)

1. Name and Address of Reporting Person * Maggiore Christopher D.  (Last) (First) (Middle) 4788 NOBLES POND DR. NW  (Street)  CANTON, OH 44718  (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 01/07/2013	3. Issuer Name and Ticker or Trading Symbol HEALTH ENHANCEMENT PRODUCTS INC [HEPI]	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)	5. If Amendment, Date Original Filed (Month/Day/Year) 01/10/2013
		6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input 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	10,823,415	D	

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 (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Common Stock Purchase Warrant	07/01/2011	07/01/2014	Common Stock	2,000,000	\$ 0.25	D	
Common Stock Purchase Warrant	07/18/2011	07/18/2014	Common Stock	1,200,000	\$ 0.125	D	
Common Stock Purchase Warrant	11/01/2011	11/01/2014	Common Stock	997,272	\$ 0.125	D	
Common Stock Purchase Warrant	12/01/2011	12/01/2014	Common Stock	978,825	\$ 0.125	D	
Common Stock Purchase Warrant	05/24/2012	05/24/2015	Common Stock	40,000	\$ 0.125	D	
Common Stock Purchase Warrant	09/18/2012	09/18/2015	Common Stock	47,447	\$ 0.125	D	
Common Stock Purchase Warrant	12/26/2012	12/26/2015	Common Stock	152,553	\$ 0.125	D	

**Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Maggiore Christopher D. 4788 NOBLES POND DR. NW CANTON, OH 44718		X		

**Signatures**

/s/ Christopher Maggiore

01/11/2013

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).

### Remarks:

This Amended Form 3 is filed to correct the relationship of the Reporting Person to the Issuer.

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.