FORM 4

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

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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

I	OMB APPROVAL								
	OMB	3235-							
	Number:	0287							
	Expires:	November 30							
		2011							
	Estimate	d average							
	burden h	ours per							

(Print or Type Respon	nses)										
1. Name and Addres KINGSTONE BF	Symbol SUPER	2. Issuer Name and Ticker or Trading Symbol SUPER VISION INTERNATIONAL INC [SUPVA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_ Officer (give title Other (specify below)			
8210 PRESIDEN	(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 09/09/2005					President & CEO				
ORLANDO, FL 3		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person			
(City)	Table	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							Owned		
(Month/Day/Year) Date Execution any		2A. Deemed Execution Date, any (Month/Day/Ye		3. Transact Code (Instr. 8		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		D) 1 5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)

Reminder: Report on a separate line for each class of securities benefice	ially owned		
directly or indirectly.			
	Persons wh	o respond to the collection of	SEC 1474
	information	contained in this form are not	(9-02)
	required to	respond unless the form displays a	
	currently va	alid OMB control number.	

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

		(8-	, pares, cans, warra	, оро		,									
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. N	umber	6. Date Exerci	sable and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature of
Derivative	Conversion	Date	Execution Date, if	Transac	tion	of		Expiration Date		of Underlying		Derivative	Derivative	Ownership	Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Der	ivative	(Month/Day/Year)		Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	(Sec	arities	es		(Instr. 3 and 4)		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative			,		Aco	uired						Owned		(Instr. 4)
	Security					(A)							Following	Direct (D)	,
							oosed of						C	or Indirect	
						(D)							Transaction(s)		
							tr. 3, 4,						(Instr. 4)	(Instr. 4)	
						and							(======================================	(======================================	
							- /				A				
											Amount				
								Date	Expiration	Title	or Number				
								Exercisable	Date						
				C- 1-	* 7	(A)	(D)				of				
				Code	V	(A)	(D)				Shares				
															By
Class A															Kingstone
Common										Class A					Family
	\$ 4.3	09/09/2005		A			60,000	09/09/2005	09/09/2015	Common	60,000	\$0	60,000	I	•
Stock										Stock					Limited
Option										Stock					Partnership
															II

Reporting Owners

Departing Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
KINGSTONE BRETT M								
8210 PRESIDENTS DRIVE	X	X	President & CEO					
ORLANDO, FL 32809								

Signatures

/s/ Brett M. Kingstone	09/12/2005
Signature of Reporting Person	Date

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).

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.