Sheft Robert

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May 19, 201	1										
FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N	OMB APPROVAL		
								-	MB umber:	3235	-0104
INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF										Janua	ry 31, 2005
	SECURITIES								Estimated average burden hours per		
		17(a) of	nt to Section 16(a f the Public Utilit 30(h) of the Inves	y Holdir	ng Company	Act of 193		, re	esponse	·	0.5
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Sheft Robert			<ol> <li>Date of Event Requirin Statement (Month/Day/Year)</li> </ol>		<sup>g</sup> 3. Issuer Name <b>and</b> Ticker or Trading Syr STARTEK INC [SRT]			Symbo	l		
(Last)	(First)	(Middle)	05/11/2011		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)			
3631 TUXE	DO RD.	NW			(Check	all applicable	)				
(Street)							dividual or Joint/Group g(Check Applicable Line) Form filed by One Reporting on Form filed by More than One orting Person				
ATLANTA, GA 30305				X Director Officer (give title below) (spe		Othe				Other _X_Fe (specify below) Person Fo	
(City)	(State)	(Zip)	Та	ble I - N	on-Derivat	ive Securit	ies Benef	iciall	y Owned	l	
1.Title of Secu (Instr. 4)	rity		Ber	Amount of neficially ( str. 4)	Securities Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature Ownershi (Instr. 5)		irect Benef	icial	
Reminder: Rep owned directly			each class of securitie	es benefici	<sup>ally</sup> S	EC 1473 (7-02	2)				
	info requ	rmation con iired to resp	spond to the colle tained in this form ond unless the fo DMB control numb	n are not rm displa	ays a						
]	Fable II - D	erivative Sec	urities Beneficially (	Owned (e.	g., puts, calls,	warrants, op	tions, conv	ertible	e securities	)	
1. Title of Der (Instr. 4)	ivative Secu	Exp	Date Exercisable and biration Date th/Day/Year)	Securitie	and Amount of es Underlying ve Security	f 4. Conversi or Exerci Price of		of	6. Nature Beneficia (Instr. 5)		

Date

Exercisable Date

Expiration

Title

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

Derivative

Security

Amount or

Number of

Shares

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
Sheft Robert 3631 TUXEDO RD. NW ATLANTA, GA 30305	ÂX	Â	Â	Â		
Signatures						
Julie Pierce on behalf of Robert Sheft	t 05/19/2011					
**Signature of Reporting Person		Date				

## **Explanation of Responses:**

No securities are beneficially owned

\* 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).

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.