FORM 3

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB 32	235-			
Number: 0	104			
Estimated average				
burden hours per				
response	0.5			

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Statement (Month/Day/Y	CannaVEST Corp. [CANV]					
07/25/2013		Person(s) to Is	suer		5. If Amendment, Date Original Filed(Month/Day/Year)	
		DirectorX Officer (giv title below)	X Officer (give Other (specify		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person	
	Гable I -	Non-Derivativ	e Securities	Beneficiall	y Owned	
(Instr. 4) Beneficia		y Owned			direct Beneficial	
Common Stock 750,0			I]	By Mik-Nik Trust (1)		
Common Stock 5		00,000				
spond to the coesspond unless	ollection s the forr	of information n displays a cu	contained in rrently valid	this form a OMB contro	ol	
Date Exercisable Expiration Date nth/Day/Year)	3. Titl Securi	e and Amount of ties Underlying ative Security	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
· ,	(Instr.	4)	Price of Derivative	Derivative Security:		
	each class of secusion to the coespond to the coespond unless ities Beneficially Date Exercisable Expiration Date	Statement (Month/Day/Year) 07/25/2013 Table I - 2. Amount Beneficiall (Instr. 4) 750,000 500,000 ceach class of securities beneficially Owned (Date Exercisable Expiration Date 3. Titl Security S	Statement (Month/Day/Year) 07/25/2013 4. Relationship Person(s) to Is (Check a Director X_Officer (giv title below) VP of Table I - Non-Derivativ 2. Amount of Securities Beneficially Owned (Instr. 4) 750,000 500,000 cach class of securities beneficially owned dispond to the collection of information respond unless the form displays a cu ities Beneficially Owned (e.g., puts, calls, work) Date Exercisable Expiration Date 3. Title and Amount of Securities Underlying	Statement (Month/Day/Year) 07/25/2013 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) ———————————————————————————————————	(Month/Day/Year) 07/25/2013 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) (Director (Check all applicable) (Director (Other (specify below) (Filing(Content of the collection) (Instr. 4) 7 Sound of Securities (D) or Indirect (I) (Instr. 5) 7 Sound I By Mik-Nik (Instr. 5) 8 Sound I By Mik-Nik (Instr. 5) 9 Sound I By Mik-Nik (Instr. 5) 1 Sound I By Mik-Nik (Instr. 5) 9 Sound I By Mik-Nik (Instr. 5) 1 Sound I By Mik-Nik (Instr. 5) 9 Sound I By Mik-Nik (Instr. 5) 1 Sound I By Mik-Nik (Instr. 5) 9 Sound I By Mik-Nik (Instr. 5) 1 Sound I By Mik-Nik (Instr. 5) 9 Sound I By Mik-Nik (Instr. 5) 1 Sound I By Mik-Nik (Instr. 5) 1 Sound I By Mik-Nik (Instr. 5) 9 Sound I By Mik-Nik (Instr. 5) 1 Sound I By Mik-Nik (Instr. 5) 1 Sound I By Mik-Nik (Instr. 5) 1 Sound I By Mik-Nik (Instr. 5) 2 Sound I By Mik-Nik (Instr. 5) 2 Sound I By Mik-Nik (Instr. 5) (In	

Reporting Owners

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director 10% Owner Officer		Officer	Other	
Mona Michael III					
2793 RED ARROW DRIVE			VP of Operations		
LAS VEGAS, NV 89146					

Signatures

/s/ Michael Mona, III	12/27/2013
**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).
- (1) These shares are owned directly by the Mik-Nik Trust and indirectly by Mr. Mona as co-trustee of the trust. Mr. Mona is an officer of the Issuer, a beneficiary and the co-trustee of the Mik-Nik Trust.

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.