FORM 3

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL						
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INITIAL STATEMENT OF 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

1. Name and Address of Reporting Person - LESME DOM 2. Date of Requiring 9 (Month/Dat) 01/06/20		nth/Day/Ye	ement	3. Issuer Name and Ticker or Trading Symbol INFORMATION SYSTEMS ASSOCIATES, INC. [IOSA]				
(Last) (First) (Middle) 5440 W COUGAR AVE.				Person(s) t	4. Relationship of Report Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) LAS VEGAS, NV 8913	39			X DirectoX Officer (give title below	(Check all applicable)X Director 10% OwnerX Officer Other (give title below) (specify below) President		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) (State)	Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)			Amoun curities ned str. 4)	t of s Beneficially			direct Beneficial	
Information Systems Associates Inc. common stock			5,000,000		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)	and Expiration	. Date Exercisable nd Expiration Date Month/Day/Year)		tle and Amour ecurities erlying vative Security r. 4)	Conversion or	sion (F e [Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date		Amount or Number of Shares		Security o	Direct (D) or Indirect (I) (Instr. 5)	

Reporting Owners

Reporting Owner Name / Address	Relationships				
neporting Owner Name / Address	Director	10% Owner	Officer	Other	
LESME DOM 5440 W COUGAR AVE. LAS VEGAS, NV 89139	Х		President		

Signatures

DOm Lesme		01/11/2011		
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).

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.