

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Weekington, D.C. 20540

Washington, D.C. 20549

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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

Name and Address of Reporting Person * Ingargiola Luisa	Staten (Mont	nent h/Day/Year)	~	3. Issuer Name and Ticker or Trading Symbol BioCorRx Inc. [BICX]					
(Last) (First) (Middle) 390 EAST ORANGEWOOD AVENUE, SUITE 575		-07.00/20	19	Person(s) to Is (Check a	all applicable)		5. If Amendment, Date Original Filed(Month/Day/Year)			
(Street) ANAHEIM, CA 92806					X_ Director 10% Owner Officer (give title below) Other (specify below)			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) (Zip)	Tal	ble I -	- Non-Derivativ	e Securities	Benefi	cially	Owned		
1.Title of Security (Instr. 4)		Ben		lly Owned		Ownershi		lirect Beneficial		
					(Instr. 5)					
not require number.	ho respond t ed to respond	o the colle I unless th	ectior ne for	neficially owned di n of information m displays a cu	rectly or indire contained in rrently valid	this for	ontrol			
Persons w	ho respond t ed to respond	to the colled unless the neficially Oricisable ion Date	wned 3. Tit	neficially owned di n of information m displays a cu (e.g., puts, calls, v le and Amount of rities Underlying vative Security	rectly or indire contained in rrently valid	ons, conv	ertibleship	e		

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Ingargiola Luisa 390 EAST ORANGEWOOD AVENUE SUITE 575 ANAHEIM, CA 92806	X					

Signatures

/s/ Luisa Ingargiola	03/11-06:00/2019
**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.