FORM 4

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL
OMB 3235Number: 0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

SECURITIES

Print or Type Respon	ses)											
1. Name and Address of Reporting Person *-GLAZER MELANIE			2. Issuer Name and Ticker or Trading Symbol DIGICORP [DGCO.OB]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title below) Check all applicable) Other (specify below)				
(Last) (F 100 WILSHIRE B FLOOR	3. Date of Earliest Transaction (Month/Day/Year) 01/04/2005											
(Street) SANTA MONICA, CA 90401			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) (S	State) (Zip)		Table I - N	Non-Der	ivat	ive Secur	ities A	Acqui	red, Disposed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Exec any	ution Date, if	3. Transact Code (Instr. 8))	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		O) 15)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
Common Stock	01/04/2005			P		5,000	A	\$ 0.25	5,000	D		
Common Stock	01/05/2005			P		5,000	A	\$ 0.23	10,000	D		
Reminder: Report on a	a separate line for ea	ch cla	ass of securities	s benefici	ially	owned						
,					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.							

$\label{thm:convergence} Table~II-Derivative~Securities~Acquired,~Disposed~of,~or~Beneficially~Owned~\\ (\textit{e.g.},~puts,~calls,~warrants,~options,~convertible~securities)$

Security (Instr. 3)	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	of	ber vative rities prosed	and Expiration (Month/Day	d Expiration Date Interpretation Date An United Section 1.5 Sectio		nd Expiration Date Month/Day/Year)		and Expiration Date (Month/Day/Year)		d Expiration Date Ionth/Day/Year)		unt of erlying	Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	4, an	d 5)	Excreisable	Expiration Date	Title	Amount or Number of											

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GLAZER MELANIE 100 WILSHIRE BLVD., 15TH FLOOR SANTA MONICA, CA 90401	X						

Signatures

/s/ Melanie Glazer	01/07/2005
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.