FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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).

STATEMENT OF CHANGES IN 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

1. Name ar														
1. Name and Address of Reporting Person * BERMAN IRA W			2. Issuer Name and Ticker or Trading Symbol CCA INDUSTRIES INC [CAW]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X DirectorX Officer (give title below)					
(Last) (First) (Middle) 7127 MELROSE CASTLE LANE			3. Date of Earliest Transaction (Month/Day/Year) 09/17/2003											
(Street) BOCA RATON, FL 33496				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		(State)	(Zip)	Table I - Non-Derivative Securities Acqu				Acqui	tired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea	f Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	5. Amount of Securit Beneficially Owned Reported Transaction (Instr. 3 and 4)		Following (s)	Ownership Form: H Direct (D)	Beneficial Ownership
					Code	V	Amount	(A) or (D)	Price		or Indirec (I) (Instr. 4)		(I)	(Instr. 4)
Common	Stock		09/17/2003		S		10,000	D S	\$ 7.05	880,198			D	
indirectly.						1_				41 11.				
			Table II - F	erivative Securi	ties Acquir	conta the fo	ained ir orm dis	this for	m are	e not req	uired to re d OMB cor	formation espond unl ntrol numb	less	EC 1474 (9- 02)
				Perivative Securi		conta the for	ained ir orm dis sposed o	this for plays a of, or Ben	m are curre	e not req ently valid	uired to re d OMB cor	spond unl	less	
	Conversion	3. Transaction Date (Month/Day/	n 3A. Deemed Execution Day		5. Number	conta the for red, Dis- ptions, er 6. Da and 1 (Mor	ained ir orm dis sposed o convert	of this for splays a of the security of the se	eficial rities) 7. T Ame Und	e not req ently valid	uired to red OMB cor	spond unl	of 10. Ownersh Form of Derivatir Security Direct (I or Indire	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

Donatic Community (Addition	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BERMAN IRA W 7127 MELROSE CASTLE LANE BOCA RATON, FL 33496	X	X	CHAIRMAN OF BOARD; SR VP			

Signatures

IRA W. BERMAN	09/17/2003
**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.