FORM	4	

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

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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

(Print or Type Responses)	1										
1. Name and Address of Reporting Person - 2. Issuer Name and Ticker or Trading Symbol Rubin Steven D Opko Health, Inc. [OPK]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) OPKO HEALTH, INO BOULEVARD, SUIT	· ·	X D ID	3. Date of Earliest Transaction (Month/Day/Year) 04/28/2008					X Officer (give title below) Other (specify below) Executive VP - Administration			
MIAMI, FL 33137	(Street)		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)	Т	able I - No	n-Dei	rivative S	ecuritie	s Acqu	ired, Disposed of, or Beneficially Ow	ned	
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		4. Securi (A) or D (Instr. 3, Amount	(A) or	of (D)	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

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.	
Persons who re	

Persons who respond to the collection of information SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numbe	r of	6. Date Exer	rcisable and	7. Title and	l Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	Derivative	e	Expiration I	Date	of Underly	ing	Derivative	Derivative	Ownership	of Indirect
		(Month/Day/Year)		Code		Securities		(Month/Day	/Year)	Securities		-		Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Acquired				(Instr. 3 and	d 4)	(Instr. 5)	-	Derivative	1
	Derivative					or Dispos	ed							2	(Instr. 4)
	Security					of (D)							0	Direct (D)	
						(Instr. 3, 4	ł,						· · · · · ·	or Indirect	
						and 5)							Transaction(s)	< / .	
											Amount		(Instr. 4)	(Instr. 4)	
									Expiration	1 itla	or				
				C. I.	v			Exercisable	Date		Number				
				Code	V	(A)	(D)				of Shares				
Stock Option (Right to Buy)	\$ 1.65	04/28/2008		А		200,000		<u>(1)</u>	04/28/2015	Common Stock	200,000	\$ 0	200,000	D	

Reporting Owners

Dementing Commun Marris (Address			Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Rubin Steven D OPKO HEALTH, INC. 4400 BISCAYNE BOULEVARD, SUITE 1180 MIAMI, FL 33137	Х		Executive VP - Administration				

Signatures

/s/ Steven Rubin	04/29/2008
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).

(1) This option will vest in four equal annual installments beginning April 28, 2009.

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.