| FORM 4 |  |
|--------|--|
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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).     |

#### 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

| (Thit of Type Respons                        | (3)  |  |  |              |       |  |   |   |                                       |  |  |
|--|--|--|--|--------------|-------|--|---|---|---------------------------------------|--|--|
| 1. Name and Address of<br>Yu Alice Lin-Tsing | 2. Issuer Name <b>an</b><br>Opko Health, Inc |  | Tradi  | ng Symb      | ol    | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br>X Director 10% Owner |   |   |                                       |  |  |
| (Last)<br>C/O OPKO HEALT<br>BLVD.            | (First)<br>FH, INC., 4400                    | DIGGLIDIE  | 3. Date of Earliest T<br>04/21/2009            | ransaction ( | (Mont | th/Day/Ye  | Officer (give title below) Officer (give title below) | ther (specify belo  | ow)                                   |  |  |
| MIAMI, FL 33137                              |  | 4. If Amendment, Date Original Filed(Month/Day/Year) |  |              |       |  |   | 6. Individual or Joint/Group Filing(Check Applicable Line)<br>_X_Form filed by One Reporting Person<br>Form filed by More than One Reporting Person |                                       |  |  |
| (City)                                       | (State)                                      | (Zip)  | Т  | able I - No  | n-Der | rivative S   | ecurities   | s Acqu  | ired, Disposed of, or Beneficially Ow | ned  |  |
| 1.Title of Security<br>(Instr. 3)            |  | 2. Transaction<br>Date<br>(Month/Day/Year)           | Execution Date, if Code (A) or Disposed of (D) |              |       |  |   | Owned Following Reported  | 6.<br>Ownership<br>Form:              | 7. Nature<br>of Indirect<br>Beneficial         |  |
|  |  |  | (Month/Day/Year)                               | Code         | v     | Amount   | (A) or<br>(D)   | Price   | x ,                                   | Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) |  |

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

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. Numb            | er  | 6. Date Exerc | isable and | 7. Title and    | l            | 8. Price of | 9. Number of                 | 10.               | 11. Nature  |
| Derivative  | Conversion   | Date             | Execution Date, if | Transact   | tion | of                 |     | Expiration Da | ite        | Amount of       |              | Derivative  | Derivative                   | Ownership         | of Indirect |
|             |  | (Month/Day/Year) |                    | Code       |      | Derivati           |     | (Month/Day/   | Year)      | Underlying      |              | 2           |                              |                   | Beneficial  |
| · · · ·     | Price of   |                  | (Month/Day/Year)   | (Instr. 8) | )    | Securities         |     |               |            | Securities      |              | · /         | -                            | Derivative        | Ownership   |
|             | Derivative   |                  |                    |            |      | Acquire            | t   |               |            | (Instr. 3 and   | d 4)         |             |                              |                   | (Instr. 4)  |
|             | Security   |                  |                    |            |      | (A) or             | 1 0 |               |            |                 |              |             | 0                            | Direct (D)        |             |
|             |  |                  |                    |            |      | Dispose            | 101 |               |            |                 |              |             | - F                          | or Indirect       |             |
|             |  |                  |                    |            |      | (D)<br>(Instr. 3,  | 4   |               |            |                 |              |             | Transaction(s)<br>(Instr. 4) | (1)<br>(Instr. 4) |             |
|             |  |                  |                    |            |      | (1130.5)<br>and 5) | ч,  |               |            |                 |              |             | (IIISU. 4)                   | (111501.4)        |             |
|             |  |                  |                    |            |      | unu b)             |     |               |            |                 | Amount       |             |                              |                   |             |
|             |  |                  |                    |            |      |                    |     |               |            |                 |              |             |                              |                   |             |
|             |  |                  |                    |            |      |                    |     |               | Expiration | Title           | or<br>Number |             |                              |                   |             |
|             |  |                  |                    |            |      |                    |     | Exercisable   | Date       |                 | of           |             |                              |                   |             |
|             |  |                  |                    | Code       | v    | (A)                | (D) |               |            |                 | Shares       |             |                              |                   |             |
| Stock       |  |                  |                    |            |      |                    |     |               |            |                 |              |             |                              |                   |             |
| Option      | ¢ 1 22   | 04/21/2009       |                    |            |      | 10,000             |     | 04/21/2010    | 04/20/2016 | Common<br>Stock | 10.000       | ¢ 0         | 40.000                       | D                 |             |
| (Right to   | \$ 1.23  | 04/21/2009       |                    | Α          |      | 40,000             |     | 04/21/2010    | 04/20/2016 | Stock           | 40,000       | \$ 0        | 40,000                       | D                 |             |
| Buy)        |  |                  |                    |            |      |                    |     |               |            |                 |              |             |                              |                   |             |

## **Reporting Owners**

|   | Relationships |           |         |       |  |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|--|
| Reporting Owner Name / Address  | Director      | 10% Owner | Officer | Other |  |  |  |  |
| Yu Alice Lin-Tsing<br>C/O OPKO HEALTH, INC.<br>4400 BISCAYNE BLVD.<br>MIAMI, FL 33137 | х             |           |         |       |  |  |  |  |

# Signatures

| /s/ Steven D. Rubin              | 04/23/2009 |  |
|----------------------------------|------------|--|
| Signature of Reporting<br>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.

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