FORM 3

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL				
OMB	3235-			
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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. Name and Address of Reporting Person *-	2. Date o		Requir	ing 3. Issuer Nam QUIKBYT			~ .			
Opko Health, Inc.		Day/Year)	QUIRDITI	2 501 1 117	iicz ii	ie [QBS	, · · ·]		
(Last) (First) (Middle 4400 BISCAYNE BOULEVARD, SUITE 1180	09/21/2	-09/21/2009		Person(s) to I (Check	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (give title below) Other (specify below)			5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) MIAMI, FL 33137				Officer (giv				y 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	ole I	- Non-Derivati	ve Securiti	es Ben	eficially	Owned		
1.Title of Security (Instr. 4)		Ben		t of Securities lly Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Owne	rship	lirect Beneficial		
Common Stock		59,	015,2	257 <u>(1)</u>	D					
	respond to	the colle	ection	neficially owned d n of information rm displays a cu	contained	in this				
Table II - Derivative Se	curities Benef	icially O	wned	(e.g., puts, calls,	warrants, op	tions, c	onvertibl	e securities)		
1. Title of Derivative Security 2. Date I		xpiration Date Se Day/Year) Se		tle and Amount of rities Underlying vative Security (. 4)	4. Conversion or Exercise Price of	se For	vnership rm of rivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable D	xpiration ate	Title	Amount or Numb of Shares	Derivativ Security	Dir or I (I)	curity: rect (D) Indirect			
Donouting O										

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Relationships % Owner Officer X	Other		
Opko Health, Inc. 4400 BISCAYNE BOULEVARD SUITE 1180 MIAMI, FL 33137		X				

Signatures

/s/ Steven D. Rubin, Executive Vice President - Administration	09/22/2009
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Includes 5,901,525 shares of Common Stock held in escrow to satisfy indemnification claims, if any, pursuant to the merger between the Issuer and Sorrento Therapeutics, Inc.

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.