FORM 4

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

OMB APPROVAL					
MB Number:	3235-0287				
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ours per response	e 0.5				

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

	pe Response		*	2 T	.		T: 1				5 T	olotional:	n of Dono	ing Dorson(-)	to Inggram	
1. Name and Address of Reporting Person – Logal Adam (Last) (First) (Middle) OPKO HEALTH, INC., 4400 BISCAYNE BLVD.				Opko Health, Inc. [OPK] 3. Date of Earliest Transaction (Month/Day/Year) 06/09/2011							5. F	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Exec Dir-Fin., CAO & Treasurer				
											X					
(Street) MIAMI, FL 33137			_X_								6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person				e)	
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acqui						Acquired	ured. 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		ate, if C			(A) (Ins	Gecurities Acquor Disposed of Str. 3, 4 and 5) (A) or (D)	of (D) Ow Tra		ving Reporte)	I I (Ownership Form: B Direct (D)	Nature f Indirect eneficial twnership nstr. 4)	
								conta form ired, Dis	aine dis	who respon d in this form plays a curre ed of, or Bene	m are not ently vali	required d OMB c	d to respo	nd unless tl		74 (9-02)
Security	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, it	4. Transaction Code		5. Number		options, convertible secur 6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirect Beneficia Ownershi (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$ 3.43	06/09/2011		A		75,000)	<u>(1)</u>		06/08/2018	Common Stock	75,000	\$ 0	75,000	D	
	ting O															

D	Relationships							
Reporting Owner Name / Address	Director 10% Owner Office		Officer	Other				
Logal Adam OPKO HEALTH, INC. 4400 BISCAYNE BLVD. MIAMI, FL 33137			Exec Dir-Fin., CAO & Treasurer					

Signatures

Adam Logal	06/13/2011
**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 June 9, 2012.

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.