Instruction 1(b).

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES Washingt

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

S AND EXCHANGE COMMISSION	
on, D.C. 20549	

OMB APPROVAL				
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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

1. Name and Address of Reporting Person *- Kolosov Dmitry				2. Issuer Name and Ticker or Trading Symbol Opko Health, Inc. [OPK]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director 10% Owner				
(Last) (First) (Middle) C/O OPKO HEALTH, INC., 4400 BISCAYNE BLVD.			3. Date of Earliest Transaction (Month/Day/Year) 03/18/2015						Officer (giv	e title below)	Otl	ner (specify belo	w)	
(Street) MIAMI, FL 33137			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ F	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 Acqui						ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, it			4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		uired 5. Amount of Owned Follow		f Securities Beneficially wing Reported s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Coo	le V Ar	(A) or nount (D)	Price				(I) (Instr. 4)	(msu. +)
Security	2. Conversion or Exercise Price of	11.1.5	3A. Deemed Execution Date, if	4. 5. Num f Transaction of Deriva Code Securit Acquir (A) or Dispos (D)		nber	6. Date Exer Expiration D	Am Und Month/Day/Year) Am Und Section 2		Title and mount of inderlying		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(Ownershi Form of Derivative Security: Direct (D or Indirect	11. Natural of Indire Benefic
(Instr. 3)	Derivative Security	(Monas Bay, 1 cas)	(Month/Day/Year)	(Instr. 8)	Acquir (A) or Dispos (D)	red sed of				d 4)	(Instr. 5)	Owned Following Reported Transaction	Security Direct (I or Indire (s) (I)	(Instr. 4
(instr. 3)	Derivative	(Holling Day, Teal)			Acquir (A) or Dispos	red sed of 3, 4,	Date Exercisable	Expiration Date		Amount or Number of Shares		Owned Following Reported	Security Direct (I or Indire	(Instr. 4

4400 BISCAYNE BLVD. MIAMI, FL 33137

Signatures

Kolosov Dmitry

Reporting Owner Name / Address

C/O OPKO HEALTH, INC.

	Adam Logal, Attorney-in-Fact	03/27/2015
ľ	Signature of Reporting Person	Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Director

X

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Relationships

Officer

Other

10% Owner

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.