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

OMB APPROVAL OMB Number 3235-0287 Estimated average burden 0.5 hours per response...

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

1. Name and Address of R Rubin Steven D	eporting Person		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				
OPKO HEALTH, INC	^(First) C., 4400 BISCA	TO TO DI TID	3. Date of Earliest Transaction (Month/Day/Year) 05/03/2016				X_Officer (give title below) Other (specify below) Executive VP-Administration				
(Street) MIAMI, FL 33137			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)	T	Fable I - No	n-De	erivative Se	ecuriti	es Acqui	ired, Disposed of, or Beneficially Ow	ned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)	ion	4. Securiti (A) or Dis (Instr. 3, 4	posed	of (D)	Owned Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect	Beneficial Ownership
				Code	v	Amount	or (D)	Price		(I) (Instr. 4)	
Common Stock		05/03/2016		М		250,000	А	\$ 1.16	5,692,407	D	
Common Stock		05/03/2016		F		134,918 (1)	D	\$ 10.34 (2)	5,557,489	D	
Common Stock									20,091,062	I	See Footnote (3)

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

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form displays a currently valid OMB control number.

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

Derivative Security	Derivative	9. Number of Derivative	10. Ownership	11. Nature
Security			Ownership	of Indingot
2	Security			of maneet
Instr 5)		Securities	Form of	Beneficial
	(Instr. 5)	Beneficially	Derivative	Ownership
			2	(Instr. 4)
		0		
			2.4	
		(Instr. 4)	(Instr. 4)	
¢.0	¢ 0	0	D	
\$0	\$0	0	D	
-		,	Owned Following Reported Transaction(s) (Instr. 4)	Owned Following Reported Transaction(s)Security: Direct (D) or Indirect Transaction(s)(I) (Instr. 4)(Instr. 4)

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Rubin Steven D OPKO HEALTH, INC. 4400 BISCAYNE BLVD. MIAMI, FL 33137	Х		Executive VP-Administration				

Signatures

Steven D. Rubin	05/05/2016
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).
- Represents the number of shares withheld by the Company at the direction of the reporting person for payment of the exercise price and tax liability in connection with the exercise of (1) the stock option. No shares of Common stock were sold by the reporting person in connection with this transaction. The reporting person has retained the net number of shares issued upon the exercise of the option, less the amount retained to pay the associated tax liability (115,082 of shares).
- (2) Closing market price of the Company's common stock on the transaction date.

(3) These securities are owned directly by The Frost Group, LLC. The reporting person disclaims beneficial ownership of these securities, except to the extent of any pecuniary interest therein and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.
 (4) The options were granted on May 5, 2009 and vested in four equal installments beginning on May 5, 2010.

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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