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Opko Healt Form 4 July 16, 200 FORN Check t if no lor subject Section Form 4	D7 A 4 UNITED STATE his box his box his box to 16.	Washingt	on, D.C. 205	OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per						
Form 5 obligati may con <i>See</i> Inst 1(b).	Filed pursuant to ons ntinue. Section 17(a) of the	•		response	0.5					
(Print or Type	Responses)									
	Address of Reporting Person <u>*</u> ma Investment Trust	2. Issuer Name Symbol Opko Health,		Frading		ssuer	onship of Reporting Person(s) to			
(Last)	(First) (Middle)	3. Date of Earlies				(Check	(Check all applicable)			
4400 BISC 15TH FLO	CAYNE BOULEVARD, OOR	(Month/Day/Yea 07/12/2007								
	(Street)		ed(Month/Day/Year) Applicable L _X_ Form fi					r Joint/Group Filing(Check) by One Reporting Person y More than One Reporting		
MIAMI, F					P	erson				
(City)	(State) (Zip)				-	red, Disposed of,	or Beneficial	-		
1.Title of Security (Instr. 3)	any		4. Securitie actionor Dispose (Instr. 3, 4 8)	d of (D) and 5) (A) or	red (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common		Code		(D)	Price \$					
Stock	07/12/2007	Р	2,500	А	ф 3.69	36,521,423	D			
Common Stock	07/12/2007	Р	25,700	А	\$ 3.7	36,547,123	D			
Common Stock	07/13/2007	Р	4,034,46) A	\$ 1.8	40,581,583	D			
Common Stock	07/13/2007	Р	300	А	\$ 3.81	40,581,883	D			
Common Stock	07/13/2007	Р	4,300	А	\$ 3.87	40,586,183	D			

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Common Stock	07/13/2007	Р	3,000	А	\$ 3.88	40,589,183	D	
Common Stock						15,490,546	Ι	See Footnote

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

Persons who respond to the collection of information 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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	of (Month/Day/Year) Derivative Securities Acquired		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo
				(A) or Disposed						Repo Trans
				of (D) (Instr. 3, 4, and 5)						(Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1. 9				Officer	Other		
Frost Gamma Investment Trust 4400 BISCAYNE BOULEVARD, 15TH MIAMI, FL 33137	I FLOOR		Х				
Signatures							
/s/ Frost Gamma Investments Trust	07/16/2007	7					
**Signature of Reporting Person	Date						
Explanation of Respor	ises:						

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) These securities are owned directly by The Frost Group, LLC, Frost Gamma Investments Trust is a principal member of The Frost Group. The reporting person disclaims beneficial ownership of these securities, except to the extent of any pecuniary interest therein and this

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report shall not be deemed an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

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.