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LERNER R Form 4 May 17, 20 FORM Check th if no lor subject to Section Form 4 Form 5 obligation may cort See Inst	OMB AF OMB Number: Expires: Estimated a burden hour response	•									
<i>See</i> Instruction 1(b). 30(h) of the Investment Company Act of 1940											
(Print or Type	Responses)										
1. Name and J LERNER F	2. Issuer Name Symbol Opko Health,			Fradin	0	5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (Middle)	3. Date of Earlies	-	-			(Check all applicable)				
OPKO HE. BISCAYN	(Month/Day/Yea 05/16/2012	16/2012					_X_ Director10% Owner Officer (give titleOther (specify below)below)				
MIAMI, FI	4. If Amendment Filed(Month/Day/	nendment, Date Original Ionth/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) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)	any	med 3.	te, if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial		
Common		Code	V Ar	mount	(D)	Price	(Instr. 3 and 4)				
Stock	05/16/2012	Р	2,5	500	А	\$ 4.57	32,500	D			
Common Stock	05/16/2012	Р	4,5	553	А	\$ 4.581	37,053	D			
Common Stock	05/16/2012	Р	15	,447	А	\$ 4.59	52,500	D			
Common Stock	05/16/2012	Р	5,(000	A	\$ 4.6022	57,500	D			
Common Stock	05/16/2012	Р	13	,200	А	\$ 4.6123	70,700	D			

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Common Stock	05/16/2012	Р	6,800	А	\$ 4.62	77,500	D
Common Stock	05/16/2012	Р	2,500	А	\$ 4.63	80,000	D

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 Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
LERNER RICHARD A OPKO HEALTH, INC. 4400 BISCAYNE BLVD. MIAMI, FL 33137	Х							
Signatures								
Adam Logal, Attorney-in-Fact	05/1	7/2012						
**Signature of Reporting Person	D	ate						

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). 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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