FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| | alev Am | | /liddle) | | Pro | Issuer Name and Ticker or Trading Symbol Protalix BioTherapeutics, Inc. [PLX] Date of Earliest Transaction (Month/Day/Year) 12/02/2009 | | | | | | | | | | all app | icer (give title | | 10% C | Owner (specify |
|--|---|--|----------|----------------------------------|---|---|--------|--|--|--|--|---|--------------------------|---------|-------------------------|--|---|---|--|--|
| C/O PRO 2 SNUNI | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applic Line) X Form filed by One Reporting Person | | | | | | | | | |
| l . | (Street) CARMIEL L3 20100 | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | oorting |
| (City) | (Sta | ate) (Z | ľip) | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - N | lon-Deriv | ative | Secu | ıritie | s Acq | uired, l | Disp | osed o | f, or | Bene | eficia | ally (| Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | | Execution | | | Transaction Disposed Code (Instr. and 5) | | rities Acquired (A ed Of (D) (Instr. 3, | | | 3, 4 Secu Bene Own | | icially d | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | Amount | | A) or O) | Price | , | Following Reported Transaction(s) (Instr. 3 and 4) | | (iiisti | . 4) | (msu. 4) | | | | |
| Common | Stock | 2009 | | | | P | | 1,000 | | A \$8 | | 68 | 1,000 | | D ⁽¹⁾ | | | | | |
| Common Stock 12/02/20 | | | | | | 2009 | | | P | | 680 | | A | \$8.2 | | 1,680 | | | D ⁽¹⁾ | |
| 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) | if any | emed ion Date, n/Day/Year) | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | str. | Secu | ivative urity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | O F O O (I) (1) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | Code | V (A) (D) | | | | Expiration Date | Title | or | mber | | | | | | | | | |

Explanation of Responses:

1. Mr. Bar Shalev is the manager of Techno-Rov Holdings (1993) Ltd. Mr. Bar-Shalev disclaims beneficial ownership of the securities of the Issuer held, and previously reported, by Techno-Rov Holdings.

/s/ Yossi Maimon, POA

12/09/2009

** Signature of Reporting Person Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

^{*} 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).