(Street)
MIAMI

(City)

FL

(State)

33137-3227

(Zip)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average burd	len
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

					0	r Sec	tion 30	U(II) OT th	ie in	vesimen	t Co	mpany A	Ct of 194	U						
Name and Address of Reporting Person* FROST PHILLIP MD ET AL						2. Issuer Name and Ticker or Trading Symbol ORTHODONTIX INC [ORTX.OB]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last)	(First	•	(Mido	dle)			e of E		ransa	action (M	lonth	n/Day/Yea	ar)				give t		Otl	ner (specify ow)
4400 BISCA	AYNE BL	VD			[4. If A	mendr	ment, Da	ite o	f Origina	ıl File	ed (Month	/Day/Ye	ar)	6. li		Joint/G	Group Filir	ng (Che	ck Applicable
(Street) MIAMI	FL		331	37-3227												Form f	iled by	One Rep	_	Person Reporting
(City)	(Stat	e)	(Zip)																	
		Tab	le I	- Non-De	erivat	ive S	Secui	rities <i>A</i>	\cq	uired,	Dis	posed	of, or	Ben	neficial	ly Owne	t			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Exe if a	cution 1y	eemed ution Date, th/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)				and Securities Beneficially Owned		6. Owner Form: I (D) or Indirect	Direct	7. Nature of Indirect Beneficial Ownership	
									Cod	de V	A	mount	(A) c	r P	Price	Following Reported Transactio (Instr. 3 ar	n(s)	(Instr. 4	1)	(Instr. 4)
Common Sto	ock ⁽¹⁾			01/31/2	2007				2	х	2	2,157,30	2 A	9	\$1.376	9,766,	273	I		Frost Gamma Investments Trust ⁽²⁾
			Ta	able II - De						,		sed of, nvertib			•	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec	Deemed cution Date, if nth/Day/Year)	4. Transac Code (I 8)	tion	5. Nun Deriva Securi Acqui	mber of	6	6. Date Exer Expiration D Month/Day	rcisab Date	le and	7. Title an	d Am	ount of	8. Price Derivating Security (Instr. 5)	ve deri Seco Ben Owr	umber of vative urities eficially ned owing orted	10. Owners Form: Direct (or Indir (I) (Inst	Beneficial Ownership ect (Instr. 4)
					Code	v	(A)	(D)		Date Exercisable		xpiration ate	Title		Amount of Number of Shares			nsaction(s)		
Warrants ⁽¹⁾	\$1.376	01/31/2007			х			2,157,30	02 1	12/31/2006	6 01	1/31/2007	Comm		2,157,3	(3)		0	I	Frost Gamma Investments Trust ⁽²⁾
		Reporting Person																		
(Last) 4400 BISCA	,	First)		(Middle)																

	dress of Reporting Persima Investment	
(Last) 4400 BISCA' 15TH FLOOR	(First) YNE BOULEVARD	(Middle)
(Street) MIAMI	FL	33137
(City)	(State)	(Zip)

Explanation of Responses:

- 1. The share amounts reflect the Reporting Person's holdings after a 1:10 reverse stock split, which was effective in December 2006.
- 2. These securities are held by Frost Gamma Investments Trust, of which the reporting person is the trustee. Frost Gamma Limited Partnership is the sole and exclusive beneficiary of Frost Gamma Investments Trust. The Reporting Person is one of two limited partners of Frost Gamma, L.P. The general partner of Frost Gamma, L.P. is Frost Gamma, Inc., and the sole shareholder of Frost Gamma, Inc. is Frost-Nevada Corporation. The Reporting Person is also the sole shareholder of Frost-Nevada Corporation.
- 3. Received in exchange for warrants to purchase 32,111 ordinary shares of Protalix Ltd. in connection with the merger of Protalix Acquisition Co. Ltd., a wholly-owned subsidiary of the Company, with and into Protalix Ltd. and the resulting acquisition of Protalix Ltd. by the Company.

/s/ Phillip Frost, M.D. 02/02/2007 /s/ Phillip Frost, M.D. as 02/02/2007 <u>Trustee</u>

** Signature of Reporting Person

Date

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

- * 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.

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.

Exhibit 99

Form 4 - Joint Filer Information

Name: Frost Gamma Investments Trust

Address: 4400 Biscayne Boulevard

15th Floor Miami, Florida 33137

Steven D. Rubin Designated Filer:

Issuer & Ticker Symbol: Orthodontix, Inc. (ORTX.OB)

Date of Event Requiring Statement:

January 31, 2007

Signature:

/s/ Phillip Frost, M.D., Trustee Phillip Frost, M.D., Trustee

Signature:

/s/ Phillip Frost, M.D Phillip Frost, M.D.