FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPF	ROVAL					
OMB Number: 3235-010						
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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 Add Bashan Dro		R (N	Date of Event equiring Staten Month/Day/Year 6/30/2019	nent	3. Issuer Name and Ticker or Trading Symbol Protalix BioTherapeutics, Inc. [ PLX ]							
(Last) (First) (Middle) C/O PROTALIX BIOTHERAPEUTICS, INC.					Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)			
2 SNUNIT ST POB 455	REET, SCIEN	ICE PARK,			X Officer (give title Other (specify below)  President & CEO			´ [6	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person			
(Street) CARMIEL	L3	20100							Form filed b Reporting P	y More than One erson		
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						nt of Securities ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable an Expiration Date (Month/Day/Year)		3. Title and Amount of Secur Underlying Derivative Secur					6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	ı Title		Amount or Number of Shares	Derivative Security				

**Explanation of Responses:** 

No securities are beneficially owned.

<u>/s/ Dror Bashan</u> <u>07/02/2019</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 5 (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.