FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(I IIII of I)	pe Response)													
1. Name and Address of Reporting Person *- FROST PHILLIP MD ET AL			2. Issuer Name and Ticker or Trading Symbol Cocrystal Pharma, Inc. [COCP]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner						
(Last) (First) (Middle) 4400 BISCAYNE BLVD.			3. Date of Earliest Transaction (Month/Day/Year) 04/13/2015							e title below)		(specify below)			
(Street) MIAMI, FL 33137			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(Cit		(State)	(Zip)	Table I - Non-Derivative Securities Acqu				uired, Disposed of, or Beneficially Owned							
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)			if Coo (Ins	ransac le tr. 8)	(A (Ir	Securities Acquirities Acquiri	of (D) Own Train		decurities Being Reported	d Or Fo Di or (I)	wnership of orm: Be irect (D) Ov Indirect (Ir	eneficial wnership
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1. Title of Derivative Security	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transact	s, calls, 5. N Der Sec or I of (fumber ivative urities uired (Dispose D) tr. 3, 4,	cquire ts, op of 6. Ex (A)	form are valid OM ed, Dispo- tions, cor	e not required AB control num sed of, or Bene avertible secur ercisable and Date	to respond mber. eficially Ov	unless the	8. Price of		10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	s, calls, 5. N Der Sec Acc or I of ((Ins and	fumber ivative arities uired (bispose D) tr. 3, 4, 5)	cquire ts, op of 6. Ex (N	form are valid ON ed, Dispositions, cor Date Executions	enot required AB control nur sed of, or Bene evertible secur ercisable and Date y/Year) Expiration	to respond mber. eficially Ovities) 7. Title an of Underly Securities	unless the	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownershi

Reporting Owners

Donastina Ossa Nasa / Addasa	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
FROST PHILLIP MD ET AL						
4400 BISCAYNE BLVD.	X	X				
MIAMI, FL 33137						

Signatures

/s/ Phillip Frost, M.D	04/15/2015
**Signature of Reporting Person	Date

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).
- (1) The Securities vest in four equal annual increments with the first vesting date being one year from the Transaction Date.
- (2) Not applicable

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

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.