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BIOMARIN PHARMACEUTICAL INC Form 4/A

December 2	2, 2006										
FORM	ЛД						OMB AF	PROVAL			
	UNITED		CURITIES . Washingtor			OMMISSION	OMB Number:	3235-0287			
Check th if no lon	ider						Expires:	January 31, 2005			
subject t Section Form 4 d	16. SIAIEN	AENT OF CH		I BENEFIC RITIES	CIAL OWN	NERSHIP OF	Estimated average burden hours per				
Form 5 obligatio may con <i>See</i> Instr 1(b).	ons Section 17(lding Comp	any Act of	1935 or Section	•	0.5			
(Print or Type	Responses)										
1. Name and A	Address of Reporting E PIERRE	Sym				5. Relationship of Reporting Person(s) to Issuer					
		BIOMARIN PHARMACEUTICAI INC [BMRN]					(Check all applicable)				
(Last)	(Last) (First) (Middle) 3. Date of (Month/			Fransaction		_X_Director10% Owner Officer (give titleOther (specify					
C/O BIOM PHARMAO DIGITAL I	CEUTICAL INC.	12/2	12/2006			below)	below)				
	(Street)		Amendment, D	-		6. Individual or Joi	nt/Group Filin	g(Check			
			l(Month/Day/Ye 14/2006	ar)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tabla I Nan	Dorivotivo Sc	aunitias A ag	uired, Disposed of,	or Donoficial	ly Owned			
	2 Transation Date				-			-			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		n Date, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5)		of (D)	Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Code V	C	A) or D) Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)				
Common Stock	12/12/2006		Р	1,100 A	\$ 17.8875	5 1,100	Ι	Shares held by spouse.			
Common Stock	12/12/2006		Р	1,000 A	\$ 17.88	5,500	D				

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

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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)	3A. Deemed Execution Da any (Month/Day/	ate, if	4. Transactic Code (Instr. 8)	5. onNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repo	rting O	wners										
I	Reporting Owner Name / Address				Relat	tionships						
1 0				Director	10% Ow	vner Off	ficer Other					
C/O BIO 105 DIGI	/IE PIERRE MARIN PH ITAL DRIV O, CA 94949	ARMACEUTICA E	AL INC.	X								
Signa	tures											
lel G. Eri												

/s/ G. Eric Davis,	12/22/2006
Attorney-in-Fact	12/22/2000

<u>**</u>Signature of Reporting Person

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).

Date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *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.