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 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

| AVITAL R | EUVEN | (First) | • | | | | | er or Tradin | g Symbol | | 5. R | elationshi | of Reporti | ng Person(s) | to Issuer | |
|---|--|--|--|---|--|---|--------|-----------------------------------|------------------------------------|---|--|--|---------------------------------------|---|------------------------------------|---------------------------------------|
| MA'ARAG | | | 0.0144.5 | | 2. Issuer Name and Ticker or Trading Symbol NEOPROBE CORP [NEOP] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| | (Last) (First) (Middle) MA'ARAGIM ENTERPRISE LTD., 28 HAMA'APILIM STREET | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/15/2006 | | | | | | | | e title below) | Oth | er (specify below | v) |
| (Street) RAMAT HASHARON 47240 | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | _X_1 | 6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) (State) (Zip) | | | (Zip) | Table I - Non-Derivative Securities Acqui | | | | | | Acquired, | ired, Disposed of, or Beneficially Owned | | | | | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year | | | 2A. Deemed Execution Date, if | | Date, if | | 8) (| I. Securiti A) or Dis Instr. 3, 4 | sposed of and 5) (A) or | f (D) Owr Tran | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | ed | Ownership Form: | Beneficial Ownership | |
| - | Conversion r Exercise | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any | 4. Transac Code | s, ca | 5. Num of Derivat | rants, | form d | osed of, onvertible ercisable Date | a curre or Benef e securi | ficially Owties) 7. Title an Amount o Underlyin | ned d f | 8. Price of Derivative Security | 9. Number of Derivative Securities | of 10. Ownersh Form of | 11. Natur of Indirect Beneficia |
| De | rice of Derivative ecurity | /e | (Month/Day/Year) |) (Instr. 8) | | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | f | | | Securities (Instr. 3 au | | (Instr. 5) | Beneficially Owned Following Reported Transaction(s (Instr. 4) | Security: Direct (Dor Indirect) | (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisabl | Expire Date | ation | Title | Amount or Number of Shares | | | | |
| Stock Option - Right to Buy | \$ 0.27 | 12/15/2006 | | A | | 20,000 |) | 12/15/20 | 07 12/1: | 5/2016 | Common Stock | 20,000 | \$ 0 | 20,000 | D | |
| Reporti | ing O | wners | | | | | | | | | | | | | | |

| Danisation - Orange Name / Addisor | Relationships | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| AVITAL REUVEN MA'ARAGIM ENTERPRISE LTD. 28 HAMA'APILIM STREET RAMAT HASHARON 47240 | X | | | | | | |

Signatures

| By: William J. Kelly, Jr., Attorney-in-Fact | 01/16/2007 |
|---|------------|
| **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).

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.