

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

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### INITIAL STATEMENT OF 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

(Print or Type Responses)						
1. Name and Address of Reporting Person <sup>*</sup> Kenyon Julian Norman	2. Date of Event Requiring Statement (Month/Day/Year) 07/16/2012	3. Issuer Name and Ticker or Trading Symbol Propanc Health Group Corp [PPCH]				
(Last) (First) (Middle) BEECHWOOD, EMBLEY LANE, EAS' WELLOW		Issuer			5. If Amendment, Date Original Filed(Month/Day/Year) 08/06/2012	
<sup>(Street)</sup> ROMSEY HAMPSHIRE, X0 SO516DN		Officer (give the below)			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)	Table I - Non-Derivative Securities Beneficially Owned					
1.Title of Security (Instr. 4)	2. Amount of Se Beneficially Ow (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natur (Instr. 5	re of Indirect Beneficial Ownership )	
Shares in Propanc Health Group Corp.	L)	D				

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

SEC 1473 (7-02)

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 control number.

### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(Instr. 4)	and Expirati	and Expiration Date Month/Day/Year)		tle and Amount of rities Underlying Derivative rity : 4)	or Exercise Price of	Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	(D) or Indirect (I) (Instr. 5)	

## **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Kenyon Julian Norman BEECHWOOD, EMBLEY LANE EAST WELLOW ROMSEY HAMPSHIRE, X0 SO516DN	Х	Х			

### Signatures

/s/ Julian Norman Kenyon	08/22/2012	
**Signature of Reporting Person	Date	

# **Explanation of Responses:**

- \* 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).
- (1) This Form 3 Amendment is being filed to correct a clerical error in the initial Form 3 report that mistakenly misrepresented the total amount beneficially owned by the Dr. Julian Kenyon.

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.