GOUDIS RICHARD

Form 3

December 15, 2004

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

OMB APPROVAL

OMB Number:

3235-0104

Expires:

response...

January 31, 2005

0.5

Estimated average burden hours per

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Statement **GOUDIS RICHARD**

(Last) (First) (Middle)

C/O HERBALIFE INTERNATIONAL, INC.. 1800 CENTURY PARK **EAST**

(Street)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

(Month/Day/Year)

12/15/2004

4. Relationship of Reporting Person(s) to Issuer

HERBALIFE LTD. [HLF]

Filed(Month/Day/Year)

(Check all applicable)

10% Owner Director _X__ Officer Other (give title below) (specify below) Chief Financial Officer

6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting

5. If Amendment, Date Original

Person

Form filed by More than One

Reporting Person

LOS ANGELES, CAÂ 90067

(City) (State) (Zip)

1. Title of Security (Instr. 4)

Table I - Non-Derivative Securities Beneficially Owned

Beneficially Owned (Instr. 4)

2. Amount of Securities

Ownership Form:

4. Nature of Indirect Beneficial Ownership

(Instr. 5)

Direct (D) or Indirect (I) (Instr. 5)

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)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

5. Ownership Conversion or Exercise Form of Price of Derivative

6. Nature of Indirect Beneficial Ownership

(Instr. 5)

Derivative Security:

1

Edgar Filing: GOUDIS RICHARD - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Non-Qualified Stock Option	(1)	06/14/2014	Common Stock	40,000	\$ 8.02	D	Â
Non-Qualified Stock Option	(2)	09/01/2014	Common Stock	7,500	\$ 9	D	Â
Non-Qualified Stock Option	(1)	06/14/2014	Common Stock	40,000	\$ 12	D	Â
Non-Qualified Stock Option	(2)	09/01/2014	Common Stock	7,500	\$ 13	D	Â
Non-Qualified Stock Option	(3)	12/01/2014	Common Stock	150,000	\$ 15.5	D	Â
Non-Qualified Stock Option	(1)	06/14/2014	Common Stock	40,000	\$ 16	D	Â
Non-Qualified Stock Option	(2)	09/01/2014	Common Stock	7,500	\$ 17	D	Â
Non-Qualified Stock Option	(1)	06/14/2014	Common Stock	40,000	\$ 20	D	Â
Non-Qualified Stock Option	(2)	09/01/2014	Common Stock	7,500	\$ 21	D	Â
Non-Qualified Stock Option	(1)	06/14/2014	Common Stock	40,000	\$ 24	D	Â
Non-Qualified Stock Option	(2)	09/01/2014	Common Stock	7,500	\$ 25	D	Â

Reporting Owners

Reporting Owner Name / Address		Relationships					
topotong of not runte / runtess	Director	10% Owner	Officer	Other			
GOUDIS RICHARD C/O HERBALIFE INTERNATIONAL, INC. 1800 CENTURY PARK EAST LOS ANGELES Â CAÂ 90067	Â	Â	Chief Financial Officer	Â			

Signatures

/s/ Vicki Tuchman, by power of	12/15/2004
attorney	12/13/2004
**Signature of Reporting Person	Date

Reporting Owners 2

Edgar Filing: GOUDIS RICHARD - Form 3

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) Options vest quarterly in 5% increments beginning 6/30/04.
- (2) Options vest quarterly in 5% increments beginning 9/30/04.
- (3) Options vest in three equal installments on 12/1/07, 12/1/08 and 12/1/09

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.