## FORM 4

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

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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

(Print or Typ															
1. Name and Address of Reporting Person * PEZZULLO DAVID			2. Issuer Name <b>and</b> Ticker or Trading Symbol HERBALIFE LTD. [HLF]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
, ,	(Last) (First) (Middle) 1800 CENTURY PARK EAST				3. Date of Earliest Transaction (Month/Day/Year) 04/27/2005						X_Officer (give title below) Other (specify below)  Chief Accounting Officer				
(Street) LOS ANGELES, CA 90067			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						
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu				s Acquired	uired, Disposed of, or Beneficially Owned							
1.Title of Se (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)		on Da	ate, if C		8) (A	Securities Acqual (A) or Disposed constr. 3, 4 and 5)  (A) or (D)	of (D) Ow Tra		Securities Be ing Reported	i (	Ownership of Born: Bornect (D) O	. Nature f Indirect seneficial twnership (nstr. 4)
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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	Table II -  3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code	tion	5. Numb of Deriva Securitie Acquired	er ative es	display nired, Disposortions, co 6. Date Exe Expiration (Month/Da		valid OME	ned d Amount	8. Price of	9. Number of Derivative Securities Beneficially	Ownership Form of Derivative	Beneficia Ownersh
Derivative Security	Conversion or Exercise	Date	3A. Deemed Execution Date, if any	4. Transac Code	ts, california tion	lls, warr 5. Numb of Deriva Securitie	er ative es d (A) sed	display nired, Disposortions, co 6. Date Exe Expiration (Month/Da	s a currently versed of, or Bene envertible securion securions and Date	ficially Own ties)  7. Title ar of Underl Securities	d Amount ying and 4)	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	Ownership Form of Derivative Security: Direct (D) or Indirect s) (I)	of Indirect Beneficial Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	ts, california tion	5. Numb of Deriva Securitie Acquired or Dispo of (D) (Instr. 3,	er ative es d (A) sed	display nired, Disposortions, co 6. Date Exe Expiration (Month/Da	s a currently v sed of, or Bene nvertible securi recisable and Date y/Year)  Expiration	ficially Own ties)  7. Title ar of Underl Securities	ned d Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect	of Indirect Beneficial Ownersh (Instr. 4)

#### **Reporting Owners**

Ī		Relationships				
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
	PEZZULLO DAVID					
	1800 CENTURY PARK EAST			Chief Accounting Officer		
	LOS ANGELES, CA 90067					

#### **Signatures**

Vicki Tuchman by Power of Attorney	04/29/2005
**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) Option vests quarterly, in 5% increments, commencing on June 30, 2005, and on the last day of each subsequent calendar quarter thereafter until fully vested.

(2) Option granted pursuant to the Herbalife Ltd. 2004 Stock Incentive Plan.

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.