FORM 4

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

OMB APPROVAL
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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

Name and Address of Reporting Person* LAZAR MELVIN F					2. Issuer Name and Ticker or Trading Symbol ENZO BIOCHEM INC [ENZ]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) (Middle) 300 EAST 56TH STREET, APT. 18A				3. D	3. Date of Earliest Transaction (Month/Day/Year) 06/17/2004							-	XDirector10% OwnerOfficer (give title below) Other (specify below)						
NEW YORK, NY 10022				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							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						cquir	ired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea	ay/Year) Exec		, if	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership Form:	ip of Be	Beneficial	
				(Mon	ith/Day/Ye	ar)	Cod	e	V	Amount	(A) or (D)	Pri	(Instr. 3 and 4)			\ /		wnership nstr. 4)	
Common Stock, par value \$01 per share		06/17/2004				P			7,000	A	\$ 13.0	612	50,375	(1)		I		ee ootnote	
			Table I		vative Secu			t quire	con the d, D	tained i form dis Disposed	n this is splays of, or B	form a cu Senefi	are urren icially	not requ tly valid	ction of inf lired to res OMB cont	pond unle	ss	14	74 (9-02)
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution any	3A. Deemed Execution Date, if	Code of Deri Secu Acqu (A) of Disp of (I (Instr. 8)		5. 6. I Number and		Date Exercisable I Expiration Date onth/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Own Form Deriv Secu Direct or In	rative rity: t (D) lirect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)		
					Code	V	(A)		Date Exe	e ercisable	Expirat Date	tion ,	Title	Amount or Number of Shares					

Reporting Owners

P (0 N (Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LAZAR MELVIN F 300 EAST 56TH STREET APT. 18A NEW YORK, NY 10022	X						

Signatures

/s/ Melvin F. Lazar	06/17/2004
**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) The reporting person has a direct beneficial interest in 15,375 options which have been granted pursuant to Enzo Biochem, Inc.'s 1999 Stock Option Plan, 6,000 shares
- (1) held in a Defined Benefit Plan, 4,000 shares in an Individual Retirement Account and an indirect beneficial interest in 18,000 shares which are directly beneficially owned by his spouse. (2) The reporting person has an indirect beneficial interest in these shares which are directly beneficially owned by his spouse.
 - (1) The reporting person has a direct beneficial interest in 15,375 options which have been granted pursuant to Enzo Biochem, Inc.'s 1999 Stock Option Plan, 6,000 shares
- (2) held in a Defined Benefit Plan, 4,000 shares in an Individual Retirement Account and an indirect beneficial interest in 18,000 shares which are directly beneficially owned by his spouse. (2) The reporting person has an indirect beneficial interest in these shares which are directly beneficially owned by his spouse.

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.