

MANUEL DE J GONZALEZ

License Number: ME103534

Data As Of 9/4/2025

Profession Medical Doctor License ME103534 License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2027 License Original Issue Date 01/12/2009 Address of Record 2141 NW 7 ST MIAMI, FL 33125

Controlled Substance Prescriber Yes

(for the Treatment of Chronic Non-

malignant Pain)

Authorized to Order (Medical and

Low-THC Cannabis)

Discipline on File No **Public Complaint** No

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

No Public Complaint Found

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

Discipline Public Records Request

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at: Division of Medical Quality Assurance Public Records

Yes

4052 Bald Cypress Way, Bin C01 Tallahassee, FL 32399-3251

Please include the following:

- 1. Full name and license number of the practitioner;
- 2. Name and address where documents are to be sent; and
- 3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

Subordinate Practitioners

Name	Relationship	Profession	License Effective Date
HERNANDEZ, ANTHONY ENRIQUE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9116684 11/22/2023

Name	Relationship	Profession	License Effective Date
MENENDEZ ARCIA, ALDO	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113834 5/26/2021

Click on the License Number to view License Details for that Practitioner

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