



## LAZARO ROBERTO DIAZ NUNEZ

### License Number: ME108511

Data As Of 9/25/2025

Profession	Medical Doctor
License	ME108511
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	10/29/2010
Address of Record	9250 sw 45 st MIAMI, FL 33165
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

2664 Tamiami Trail East  
NAPLES, FL 34112

#### Address

15885 PINES BLVD.  
PEMBROKE PINES, FL 33027

#### Address

14701 NW 77 AVENUE  
MIAMI LAKES, FL 33014

#### Address

6264 W. SAMPLE ROAD, #100  
CORAL SPRINGS, FL 33067

#### Address

4741 S. UNIVERSITY DRIVE  
DAVIE, FL 33326

#### Address

10 GIRALDA AVENUE  
CORAL GABLES, FL 33134

#### Address

2660 BRICKELL AVENUE BAPTIST HEALTH URGENT CARE  
MIAMI, FL 33129

#### Address

1642 TOWN CENTER CIRCLE  
WESTON, FL 33326

#### Address

1240 S. DIXIE HGHWAY  
CORAL GABLES, FL 33146

#### Address

12472 W. SUNRISE BLVD.  
SUNRISE, FL 33323

#### Address

9915 NW 41ST STREET  
DORAL, FL 33178

## 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

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.

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