



EARL MARK BREWSTER JR

License Number: ME126781

Data As Of 1/13/2026

Profession	Medical Doctor
License	ME126781
License Status	Clear/Active
License Expiration Date	1/31/2026
License Original Issue Date	01/27/2016
Address of Record	5040 nw 7th street Miami MIAMI, FL 33126
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	Yes

Secondary Locations

Address

815 NW 57 AVE Suite 207
MIAMI, FL 33126

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
BREWSTER, EARL MARK	126781	MEDICAL DOCTOR	MIAMI	FL	202413118	AC FILED

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
BROWN, STEPHANIE MARIA	ANESTHESIA PROVIDER	ADVANCED PRACTICE REGISTERED NURSE	11007016	05/26/2021
LUIS, ARMANDO	ANESTHESIA PROVIDER	ADVANCED PRACTICE REGISTERED NURSE	9357758	02/24/2021

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

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
HARMON, RHONDA LEIGH	SUBORDINATE	MEDICAL DOCTOR	97912	5/19/2017

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.