



## ROBERT RAOUF ABRAHAM

### License Number: CH12000

Data As Of 6/17/2025

Profession	Chiropractic Physician
License	CH12000
License Status	SUSPENDED/
License Expiration Date	3/31/2026
License Original Issue Date	11/01/2016
Address of Record	1954 W State Road 426 Ste 1112 OVIEDO, FL 32765
Discipline on File	Yes
Public Complaint	Yes

### Secondary Locations

No secondary locations found.

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
ABRAHAM, ROBERT RAOUF	12000	CHIROPRACTIC PH	OVIEDO	FL	202007698	OBLIGATIONS IMPOSED
ABRAHAM, ROBERT RAOUF	12000	CHIROPRACTIC PH	OVIEDO	FL	202123245	SUSPENSION
ABRAHAM, ROBERT RAOUF	12000	CHIROPRACTIC PH	OVIEDO	FL	202442236	SUSPENSION
ABRAHAM, ROBERT RAOUF	12000	CHIROPRACTIC PH	OVIEDO	FL	202442236	SUSPENSION

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
ABRAHAM, ROBERT RAOUF	12000	CHIROPRACTIC PHYSICIAN	OVIEDO	FL	202007698	AC FILED
ABRAHAM, ROBERT RAOUF	12000	CHIROPRACTIC PHYSICIAN	OVIEDO	FL	202123245	AC FILED
ABRAHAM, ROBERT RAOUF	12000	CHIROPRACTIC PHYSICIAN	OVIEDO	FL	202442236	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

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.

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.

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