



## ALAIN ESTEVEZ CABRERA

### License Number: ACN1178

Data As Of 4/28/2025

Profession	Area of Critical Need Medical Doctor
License	ACN1178
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	08/15/2019
Address of Record	5740 NW 183rd St HIALEAH, FL 33015
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### [Address](#)

7500 SW 8 St  
MIAMI, FL 33144

#### [Address](#)

151 NW 11 STREET, SUITE E102  
HOMESTEAD, FL 33030

#### [Address](#)

290 NE 8TH STREET  
HOMESTEAD, FL 33030

#### [Address](#)

8251 W. BROWARD BLVD SUITES 200-210  
PLANTATION, FL 33324

#### [Address](#)

3320 W. 84TH STREET  
HIALEAH GARDENS, FL 33018

#### [Address](#)

1600 NE MIAMI GRADENS DRIVE  
MIAMI, FL 33179

#### [Address](#)

1422 NW 7TH STREET  
MIAMI, FL 33125

#### [Address](#)

2750 W. 68TH ST., STE. 127-128  
HIALEAH, FL 33016

#### [Address](#)

450 SW 136TH AVENUE  
PEMBROKE PINES, FL 33027

#### [Address](#)

2740 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33020

#### [Address](#)

2601 S MILITARY TRAIL, SUITE 1  
WEST PALM BEACH, FL 33415

#### [Address](#)

5740 NW 183RD STREET  
HIALEAH, FL 33015

[Address](#)

9798 SW 24TH STREET  
MIAMI, FL 33165

[Address](#)

9853 SW 40 STREET  
MIAMI, FL 33165

[Address](#)

1479 27 AVENUE  
MIAMI, FL 33125

[Address](#)

149 W. 21ST STREET  
HIALEAH, FL 33010

[Address](#)

11510 QUAIL ROOST DRIVE  
MIAMI, FL 33157

[Address](#)

11701 SW 147TH AVENUE  
MIAMI, FL 33196

[Address](#)

6674 NW 57 STREET  
TAMARAC, FL 33319

[Address](#)

4578 W 12TH AVENUE  
HIALEAH, FL 33012

[Address](#)

8611 SW 40TH STREET  
MIAMI, FL 33155

## 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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