



## ANGELICA MERLANO

### License Number: PA9113696

*Data As Of 1/12/2026*

Profession	Physician Assistant
License	PA9113696
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	10/06/2020
Address of Record	2820 NE 214th street Suite 808 AVENTURA, FL 33180
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### **Address**

7481 W Oakland Park Boulevard Suite 100  
LAUDERHILL, FL 33319

#### **Address**

21097 NE 27 Court, Suite 540  
AVENTURA, FL 33180

#### **Address**

1065 NE 125th Street Suite 206  
NORTH MIAMI, FL 33161

#### **Address**

1601 N Palm Avenue #211 Campass Health Systems  
PEMBROKE LAKES, FL 33026

#### **Address**

7481 W Oakland Park Blvd #100 Campass Health Systems  
FT LAUDERDALE, FL 33319

#### **Address**

7201 N UNIVERSITY DR  
TAMARAC, FL 33321

#### **Address**

5000 W OAKLAND PARK BLVD  
FT LAUDERDALE, FL 33313

#### **Address**

1100 NW 95TH T  
MIAMI, FL 33150

#### **Address**

7201 W Broward Blvd HCA Florida Westside Hospital  
PLANTATION, FL 33324

#### **Address**

8201 W Broward Blvd HCA Florida Westside Hospital  
FT LAUDERDALE, FL 33324

### 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.

## Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
CABRERA, MARIA MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	28396	12/21/2022
CARDONNE, ESTEBAN	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	151889	12/21/2022
DE SOUZA MORAIS, MICHELE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	142733	12/19/2022
GREENSTEIN, YAKOV	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	114006	01/10/2023
MEJIA, FERNANDO	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	130573	01/03/2023
RIENAS, CHRISTOPHER ALAN	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	143109	12/21/2022
SOBHAN, TANVEER	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	98239	12/21/2022
STEIN LIFSHITZ, DANIEL	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	132570	12/16/2022
UGUCCIONI, MICHAEL JAMES	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	130666	06/01/2025
UGUCCIONI, MICHAEL JAMES	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	130666	06/01/2025
WATNICK, JERETT YALE	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	15560	12/21/2022

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

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