YERALDINE BUSTAMANTE VEGA

License Number: CI1291

Data As Of 7/7/2025			
Profession	CERTIFIED CHIROPRACTIC PHYSICIAN'S ASST		
License	CI1291		
License Status	Clear/Active		
License Expiration Date	3/31/2026		
License Original Issue Date	07/26/2024		
Address of Record	1205 E MAGNOLIA ST		
	STE 105		
	LAKELAND, FL 33801		
Discipline on File	No		
Public Complaint	No		

Secondary Locations

No secondary locations found.

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
LAVENDER, VICTORIA FAITH	SUPERVISING PHYSICIAN	CHIROPRACTIC PHYSICIAN	14353	05/19/2025
ZAGORSKI, ALEXANDRA L	SUPERVISING PHYSICIAN	CHIROPRACTIC PHYSICIAN	15358	02/24/2025

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

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