Florida HEALTH Department of Health

DANIELA FRANCIS CANASI

License Number: PA9115579

Data As Of 10/31/2026

Profession	Physician Assistant
License	PA9115579
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	01/26/2022
Address of Record	3100 SW 62 Ave MIAMI, FL 33155
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address
12472 West Sunrise Blvd
SUNRISE, FL 33323

Address
15885 Pines Blvd
PEMBROKE PINES, FL 33027

Address
4741 South University Drive
DAVIE, FL 33328

Address
8400 NW 53street
DORAL, FL 33126

Address
1228 S Pine Island Road
PLANTATION, FL 33324

Address
5975 Sunset Dr Suite 402
SOUTH MIAMI, FL 33143

Address
2660 Brickell Avenue
MIAMI, FL 33129

Address
10 Giralda Avenue
CORAL GABLES, FL 33134

Address
9915 NW 41st Street
DORAL BRANCH, FL 33126

Address
14701 NW 77th Avenue
MIAMI, FL 33014

Address
709 Alton Road
MIAMI BEACH, FL 33139

Address

1240 South Dixie Hwy

CORAL GABLES, FL 33146

Address

1642 Town Center Circle

WESTON, FL 33326

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
ARALICA, KRESIMIR	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	122655	12/01/2023
AZZO, MUNA THERESE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	56664	11/03/2023
BARAHONA, CARLOS EDUARDO	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	116587	11/02/2023
BARREAU, CARLA CECILIA MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	65218	11/22/2023
BENBOUZID, LAILA	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	116642	11/03/2023
GONZALEZ, SANDRA M MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	60524	11/10/2023
HINCAPIE, MARK RYAN	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	160908	12/03/2023
JAWAID, BENAZEER FATIMA	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	93479	11/02/2023
KANTOR, JULIE LYNN MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	85452	11/03/2023
KHALIL, PAUL ADEEB	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	115666	11/02/2023
TORRELLA, TRACY AMBER	SUPERVISING PRESCRIBING PRACTITIONER	PHYSICIAN ASSISTANT	9109175	11/02/2023

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

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