

## **MARISA PALLES**

# License Number: PA9115895

Data As Of 11/27/2025

Profession Physician Assistant

License PA9115895
License Status Clear/Active
Qualifications Prescribing

**Dispensing Practitioner** 

License Expiration Date 1/31/2026 License Original Issue Date 04/18/2022

Address of Record 4809 N Armenia Ave, Suite 220

TAMPA, FL 33603

Yes

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

4949 4th Street North

SAINT PETERSBURG, FL 33703

### Address

6182 N US highway 41 APOLLO BEACH, FL 33572

#### Address

40545 US hwy 19N Unit A TARPON SPRINGS, FL 34689

### Address

5464 Lithia Pinecrest drive

LITHIA, FL 33547

#### Address

564 Channelside drive

TAMPA, FL 33602

### Address

16521 US hwy 301 S

WIMAUMA, FL 33573

# Address

799 W Lumsden Rd

BRANDON, FL 33511

### Address

3251 66th St. North

SAINT PETERSBURG, FL 33710

### Address

7601 Seminole Blvd

SEMINOLE, FL 33772

#### Address

303 W palm ave

TAMPA, FL 33602

### Address

11406 US hwy 301 S

RIVERVIEW, FL 33578

#### Address

4505 Gunn highway

**TAMPA, FL 33624** 

#### Address

5504 Gateway blvd

WESLEY CHAPEL, FL 33544

#### Address

3301 W Gandy Blvd

TAMPA, FL 33611

#### Address

13531 State Road 54

ODESSA, FL 33556

#### Address

11969 Sheldon road

**TAMPA, FL 33626** 

#### Address

13856 N Dale mabry hwy

TAMPA, FL 33618

#### Address

22945 SR 54

LUTZ, FL 33549

#### Address

2810 W MLK Jr Blvd

**TAMPA, FL 33607** 

# 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
NANDA, PAUL KALRA	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	117861	10/13/2023
SAYA, JUSTIN MICHAEL MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	109185	02/22/2023

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

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Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.	