



DEBORAH E. PERELES

License Number: PS34484

Data As Of 4/23/2026

Profession	Pharmacist
License	PS34484
License Status	Clear/Active
Qualifications	Certified To Administer Immunizations Test and Treat Certification
License Expiration Date	9/30/2027
License Original Issue Date	10/01/1999
Address of Record	8550 STIRLING RD DAVIE, FL 33024
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
PERELES-FUENTES, DEBORAH E	34484	PHARMACIST	DAVIE	FL	200309235	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
PERELES-FUENTES, DEBORAH E	34484	PHARMACIST	DAVIE	FL	200309235	AC FILED

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
DAVIS II, CEDRIC EMDEN	IA SUPERVISING PHYSICIAN	MEDICAL DOCTOR	108693	06/09/2025
DAVIS II, CEDRIC EMDEN	TTC SUPERVISING PHYSICIAN	MEDICAL DOCTOR	108693	06/09/2025

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

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