ENRIQUE MIGUEL VAZQUEZ

License Number: ACN260

Data As Of 7/17/2025	
Profession	Area of Critical Need Medical Doctor
License	ACN260
License Status	Vol Relinquish/
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2020
License Original Issue Date	11/01/2007
Address of Record	If further information is needed, please contact the Department of Health at (850) 488- 0595.
Controlled Substance Prescriber	No
(for the Treatment of Chronic Non-	
malignant Pain)	
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

7200 NW 7 ST. #150 MED-CARE QUALITY MEDICAL CENTER

MIAMI, FL 33126

Address

900 W. 49TH STREET STE. #308 MEDPLAN CLINIC, LLC

HIALEAH, FL 33012

Address

10982 S.W. 184TH STREET MEDCARE QUALITY MEDICAL CENTERS, LLC

MIAMI, FL 33158

Address

4767 N.W 183RD STREET MEDPLAN CLINIC, LLC MIAMI GARDENS, FL 33055

Address

11825 S.W. 26TH STREET MEDCARE QUALITY MEDICAL CENTERS, LLC

MIAMI, FL 33175

Address

7200 N.W 7TH STREET MEDPLAN CLINIC, LLC

MIAMI, FL 33126

Address

900 W. 49TH STREET STE.#101 MEDCARE QUALITY MEDICAL CENTER, LLC

HIALEAH, FL 33012

Address

1149 S.W. 27TH 27TH AVENUE MEDCARE QUALITY MEDICAL CENTER

MIAMI, FL 33135

Address

4218 EAST 4TH AVENUE MEDPLAN CLINIC, LLC HIALEAH, FL 33013

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.

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