# **CRES ANTONIO RODRIGUEZ**

## License Number: ME51442

Data As Of 7/20/2025	
Profession	Medical Doctor
License	ME51442
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	08/20/1987
Address of Record	6919 NORTH DALE MABRY HWY
	SUITE 320
	TAMPA, FL 33614
Controlled Substance Prescriber	Yes
(for the Treatment of Chronic Non-	
malignant Pain)	
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:

Name

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.

# Subordinate Practitioners

	Relationship	Profession	Licen
IC MEDICAL CARE	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1996

License Effective Date

ADULT AND GERIATRIC MEDICAL CARE HCCE

5/20/2009

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

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