



MIGUEL A APONTE

License Number: ACN353

Data As Of 5/1/2026

Profession	Area of Critical Need Medical Doctor
License	ACN353
License Status	Clear/Active
License Expiration Date	1/31/2028
License Original Issue Date	07/26/2010
Address of Record	15600 NW 67TH AVE Suite 201 MIAMI LAKES, FL 33014
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

Address

2025 A NORTH DIXIE HWY SOUTH FLORIDA CARE CENTER, INC
POMPANO BEACH, FL 33060

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
APONTE, MIGUEL A	353	TEMP ACN ME	MIAMI LAKES	FL	201119513	PROBATION SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
APONTE, MIGUEL A	353	MEDI. DOCTOR-TEMP AREA OF CRITICAL NEED	MIAMI LAKES	FL	201119513	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	Effective License Date
CLINICAL CARE, INC	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	12/21/2020
MANATEE PEDIATRICS & WESTGATE OBGYN	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	11/18/2020

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

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
MYSNYK-DEANGELO, MICHELE ANN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101678	5/8/2019

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

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