



ANITALY LLC

Healing Hands Massage

License Number: MM42969

Data As Of 1/19/2026

Profession	Massage Establishment
License	MM42969
License Status	DELINQUENT/
License Expiration Date	8/31/2025
License Original Issue Date	07/12/2022
Address of Record	35973 US HWY 27 HAINES CITY, FL 33844
Discipline on File	No
Public Complaint	Yes
Alerts	Enforcement Alert 9/22/2025 10:56:15 AM 5.22.2025 - Received Order of Emergency Suspension of License.....Voluntary Relinquishment Pending Board Action filed 09/22/2025.

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

Name	License	Profession	City	County	State	Case #	Action Taken	Action Date
ANITALY LLC,	42969	MASSAGE ESTABLISHMENT	HAINES CITY	POLK	FL	202502624	ESO ISSUED	05/22/2025

Discipline Cases

No Discipline Found

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
ANITALY LLC	42969	MASSAGE ESTABLISHMENT	HAINES CITY	FL	202502624	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
HUA, FANG	MANAGER	MASSAGE THERAPIST	66672	07/05/2022

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

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
LI, JUN	OWNER	MASSAGE ESTABLISHMENT OWNER		7/7/2022

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.