GOAR N ALVAREZ

License Number: PS15028

Data As Of 8/16/2025	
Profession	Pharmacist
License	PS15028
License Status	Clear/Active
Qualifications	Certified To Administer Immunizations
	Collaborative Practice Certification
License Expiration Date	9/30/2027
License Original Issue	
Date	
Address of Record	3200 S. UNIVERSITY DRIVE
	FORT LAUDERDALE, FL 33328
Discipline on File	Yes
Public Complaint	No

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
ALVAREZ, GOAR N	15028	PHARMACIST	FORT LAUDERDALE	FL	199309866	PROBATION - OTHER MAJOR PENALTY

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.

Supervising Practitioners

Name	Relationship	Profession	License Effective Date
BASTIEN-MONTPEIROUS, NATHALIE M D	CPC SUPERVISING PHYSICIAN	MEDICAL DOCTOR	118625 11/02/2023

Name	Relationship	Profession	License	Effective Date
CASTEJON, ANA MARIA	PHARMACISTINTERN	PHARMACIST INTERN	22153	07/26/2021

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

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
ALVAREZ, GOAR N	PHARMACISTSUBORDINATE	CONSULTANT PHARMACIST	1172	4/14/2012

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.