



## ALEJANDRO JAVIER PENA MD

### License Number: ME62007

Data As Of 8/27/2025

Profession	Medical Doctor
License	ME62007
License Status	Clear/Active
License Expiration Date	1/31/2026
License Original Issue Date	04/15/1992
Address of Record	3000 HUNTER S CREEK BLVD ORLANDO, FL 32837
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

2916 17TH STREET  
SAINT CLOUD, FL 34769

#### Address

1118 S. ORANGE AVE SUITE 205  
ORLANDO, FL 32806

#### Address

820 LUCERNE TERRACE  
ORLANDO, FL 32801

#### Address

1188 Commerce Park Drive  
ALTAMONTE SPRINGS, FL 32714

#### Address

630 Main Str 630 Main Street  
ALTAMONTE SPRINGS, FL 32701

#### Address

1148 Celebration Blvd  
CELEBRATION, FL 34747

#### Address

12601 Narcoossee Road Building 100B Unit 3  
ORLANDO, FL 32832

#### Address

1925 Mizell Avenue  
WINTER PARK, FL 32792

### 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.

### Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
HOMAN, BRADLEY MICHAEL	SUBORDINATE	OSTEOPATHIC PHYSICIAN	9093	6/12/2019
WLADIS, ALAN ROBERT	SUBORDINATE	MEDICAL DOCTOR	80259	7/20/2020

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.