



JONATHAN MICHAEL SIGG

License Number: PA9103697

Data As Of 7/16/2025

Profession	Physician Assistant
License	PA9103697
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	04/11/2006
Address of Record	THE LASER LOUNGE SPA, LLC 20400 TRAILSIDE DRIVE ESTERO, FL 33928
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

496 Delaney ave Unit 408-410
ORLANDO, FL 32801

Address

11940 US-1 Suite 125
PALM BEACH GARDENS, FL 33408

Address

8850 FOUNDER SQUARE DR Unit 210
NAPLES, FL 34120

Address

The Aesthetics Lounge and Spa 13801 N Dale Mabry Hwy
TAMPA, FL 33618

Address

The Aesthetics Lounge and Spa 12301 Lake Underhill Rd Suite 105
ORLANDO, FL 32828

Address

THE LASER LOUNGE SPA, LLC 534 SE 16th Place
CAPE CORAL, FL 33990

Address

THE LASER LOUNGE SPA, LLC 11300 Lindbergh Blvd #115
FORT MYERS, FL 33913

Address

THE LASER LOUNGE SPA, LLC 11390 Palm Beach Boulevard Suite 303
FORT MYERS, FL 33905

Address

THE LASER LOUNGE SPA, LLC 5100 North Tamiami Trail Suite 104
NAPLES, FL 34103

Address

THE LASER LOUNGE SPA, LLC 1345 2nd St
SARASOTA, FL 34236

Address

The Aesthetics Lounge and Spa 1172 Jacaranda Boulevard
VENICE, FL 34292

Address

The Aesthetics Lounge and Spa 7740 Nova Dr B4
DAVIE, FL 33324

Address

12727 s Dixie hwy
PINECREST, FL 33156

Address

9130 town center pkwy #101
LAKEWOOD RANCH, FL 34202

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
FETT DESMOND, DEBRA DALTON MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	68928	11/20/2020

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

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