Florida HEALTH Department of Health

EDUARDO TOMAS WEISS

License Number: ME75865

Data As Of 10/30/2026

Profession	Medical Doctor
License	ME75865
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	05/28/1998
Address of Record	3850 HOLLYWOOD BLVD SUITE 301 HOLLYWOOD, FL 33021
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

Address
9050 Pines Blvd Suite 200
PEMBROKE PINES, FL 33024

Address
34070 NW 82 Ave Suite 111
DORAL, FL 33122

Address
1250 E. HALLANDALE BCH BLVD #800
HALLANDALE, FL 33009

Address
3000 SW 148th AVE #250
MIRAMAR, FL 33027

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
WEISS, EDUARDO TOMAS	75865	MEDICAL DOCTOR	HOLLYWOOD	FL	201400286	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
WEISS, EDUARDO TOMAS	75865	MEDICAL DOCTOR	HOLLYWOOD	FL	201400286	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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
CHARRON-MUSKAT, NANCY ANN	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102954	12/14/2018
CHARRON-MUSKAT, NANCY ANN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102954	12/14/2018
MAYA, ISABEL MARIA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9120762	9/24/2026
PAKNIS, ASHLEE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115714	9/10/2025

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.

Secondary Locations

Address

9050 Pines Blvd Suite 200

PEMBROKE PINES, FL 33024

Address

34070 NW 82 Ave Suite 111

DORAL, FL 33122

Address

1250 E. HALLANDALE BCH BLVD #800

HALLANDALE, FL 33009

Address

3000 SW 148th AVE #250

MIRAMAR, FL 33027

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
WEISS, EDUARDO TOMAS	75865	MEDICAL DOCTOR	HOLLYWOOD	FL	201400286	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
WEISS, EDUARDO TOMAS	75865	MEDICAL DOCTOR	HOLLYWOOD	FL	201400286	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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
CHARRON-MUSKAT, NANCY ANN	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102954	12/14/2018
CHARRON-MUSKAT, NANCY ANN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102954	12/14/2018
MAYA, ISABEL MARIA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9120762	9/24/2026
PAKNIS, ASHLEE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115714	9/10/2025

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.