# **ANAY SUAREZ**

# License Number: RN9179461

Data As Of 5/16/2025

Profession Registered Nurse
License RN9179461
License Status CLEAR/Active

Qualifications Multistate Registered Nurse

License Expiration Date 4/30/2027

License Original Issue

Date

07/05/2001

Address of Record 5975 SUNSET DRIVE

SUITE 402

SOUTH MIAMI, FL 33143

Discipline on File No Public Complaint No

# **Secondary Locations**

### Address

12472 W SUNRISE BLVD SUNRISE, FL 33323

#### Address

1642 TOWN CENTER CIR WESTON, FL 33326

## Address

2660 BRICKELL AVE MIAMI, FL 33129

## Address

1240 S DIXIE HIGHWAY CORAL GABLES, FL 33146

## Address

10 GIRALDA AVENE

CORAL GABLES, FL 33134

## Address

15885 PINES BLVD.

PEMBROKE PINES, FL 33027

### Address

4741 S. UNIVERSITY DRIVE

DAVIE, FL 33328

## Address

6264 W. SAMPLE ROAD SUITE 100

CORAL SPRINGS, FL 33087

## Address

14701 NW 77TH AVENUE

MIAMI, FL 33014

#### Address

9915 NW 41ST STREET

MIAMI, FL 33178

# Discipline/Admin Action

Please also check the Discipline/Admin action of the other license by clicking on the "Other License" tab.

# **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.

# Other License

Name	Relationship	Profession	License	Effective Date
	APRN CONVERSION	ADVANCED PRACTICE REGISTERED NURSE	9179461	10/19/2018

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

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