



BARBARA CERDEIRA

License Number: APRN9292566

Data As Of 12/13/2025

Profession	Advanced Practice Registered Nurse
License	APRN9292566
License Status	Clear/Active
Qualifications	Autonomous Practice APRN Dispensing Practitioner Nurse Practitioner
License Expiration Date	4/30/2027
License Original Issue Date	10/25/2017
Address of Record	434 SW 12 AVE Suite 300 MIAMI, FL 33130
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

13228 NW 11TH STREET
MIAMI, FL 33182

Address

7200 NW 7TH STREET SUITE 150
MIAMI, FL 33126

Address

900 W 49TH STREET Suite 101
HIALEAH, FL 33012

Address

10980 SW 184TH STREET
CUTLER BAY, FL 33157

Address

11825 SW 26TH STREET
MIAMI, FL 33175

Address

1149 SW 27th Avenue
MIAMI, FL 33135

Address

4218 E 4th Avenue
HIALEAH, FL 33013

Address

4767 NW 183rd Street
MIAMI GARDENS, FL 33055

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	REGISTERED NURSE	9292566	10/19/2018

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

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