ALI SAAD MALIK

License Number: OS12165

Data As Of 11/21/2025

Profession Osteopathic Physician

License Status OS12165

Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 3/31/2026
License Original Issue Date 05/14/2013

Address of Record 2820 NE 214th Street

Suite 701

Yes

AVENTURA, FL 33180

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

Address

1801 S 23rd Street Suite 1 FORT PIERCE, FL 34950

Address

130 JFK Drive Suite 138 ATLANTIS, FL 33462

Address

7540 NW 5th Street Suite 1 PLANTATION, FL 33317

Address

1380 NE Miami Gardens Drive Suite 155 NORTH MIAMI BEACH. FL 33179

Address

1345 NE 4th Avenue

FORT LAUDERDALE, FL 33304

Address

3727 N Goldenrod Road Suite 103

WINTER PARK, FL 32792

Address

2800 S Osceola Avenue ORLANDO, FL 32806

Address

1051 Port Malabar Blvd NE Suite 6-7 PALM BAY, FL 32905

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

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
KARDON, LAURIE ANN M D	SUPER-DOSUBORDINATE	MEDICAL DOCTOR	66557	8/9/2016

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

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