# FERNANDA SAMIRA PONCE

# License Number: ME156325

Data As Of 8/20/2025			
Profession	Medical Doctor		
License	ME156325		
License Status	Clear/Active		
Qualifications	Dispensing Practitioner		
License Expiration Date	1/31/2026		
License Original Issue Date	04/19/2022		
Address of Record	13500 SW 152nd St		
	MIAMI, FL 33177		
Controlled Substance Prescriber	No		
(for the Treatment of Chronic Non-			
malignant Pain)			
Discipline on File	No		
Public Complaint	No		
Public Complaint	No		

### Secondary Locations

#### Address

Oscarina Hair Design 1107 Ponce De Leon MIAMI, FL 33134 Address 4300 Alton Road Miami Beach MIAMI, FL 33140 Address 14661 SW 56th St MIAMI, FL 33175 Address 14660 SW 8th St Ste 100 MIAMI, FL 33184 Address 11805 S Dixie Hwy MIAMI, FL 33156 Address 13001 N Kendall Dr MIAMI, FL 33186 Address 8840 Bird Rd Ste 100 MIAMI, FL 33165 Address 20997 Old Culter Bay CUTLER BAY, FL 33189 Address 8750 SW 144th St Ste 100 MIAMI, FL 33176

## 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.

# Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
PEDOUSSAUT, LAURA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111939	8/10/2022

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.