



## MARIANO DIEGO CIBRAN

License Number: ME27935

Data As Of 4/24/2026

Profession	Medical Doctor
License	ME27935
License Status	Clear/Active
License Expiration Date	1/31/2028
License Original Issue Date	04/15/1976
Address of Record	4105 49th St North SAINT PETERSBURG, FL 33709
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

[Address](#)

4040 49th St  
SAINT PETERSBURG, FL 33709

[Address](#)

2550 W Dr MLK Jr Blvd  
TAMPA, FL 33607

[Address](#)

3475 East Bay Dr  
LARGO, FL 33771

[Address](#)

12170 Seminole Blvd  
LARGO, FL 33778

[Address](#)

7050 Seminole Blvd  
SEMINOLE, FL 33772

[Address](#)

7500 Park Blvd  
PINELLAS PARK, FL 33781

[Address](#)

2137 16th St North  
SAINT PETERSBURG, FL 33704

[Address](#)

2701 54th Ave South  
SAINT PETERSBURG, FL 33712

[Address](#)

1012 4th St South  
SAINT PETERSBURG, FL 33701

[Address](#)

2115 Central Ave  
SAINT PETERSBURG, FL 33713

### 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
MENDOZA, CHRISTIAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9117793	10/25/2023

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

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