



REYVING RAMON MAYORA

License Number: CI988

Data As Of 12/16/2025

Profession	CERTIFIED CHIROPRACTIC PHYSICIAN'S ASST
License	CI988
License Status	Clear/Active
License Expiration Date	3/31/2026
License Original Issue Date	01/21/2020
Address of Record	18002 Richmond Place Dr # 2027 SUITE 4 TAMPA, FL 33647
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

3450 E FLETCHER AVE SUITE 320
TAMPA, FL 33613

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
AXTMAYER CARCACHE, RAUL EMMANUEL	SUPERVISING PHYSICIAN	CHIROPRACTIC PHYSICIAN	13838	02/28/2022
BENEJAN LORENZO, JOSE EMMANUEL	SUPERVISING PHYSICIAN	CHIROPRACTIC PHYSICIAN	12776	12/15/2021
VICENTE, TERESITA	SUPERVISING PHYSICIAN	CHIROPRACTIC PHYSICIAN	12846	12/15/2021
WALKER, VENESSA-ANN ELESE	SUPERVISING PHYSICIAN	CHIROPRACTIC PHYSICIAN	10596	12/16/2019

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

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