### CYNTHIA CAROL REINOSO

### License Number: PA9106983

Data As Of 10/21/2025

Profession Physician Assistant

License PA9106983
License Status Clear/Active
Qualifications Prescribing
License Expiration Date 1/31/2026
License Original Issue Date 11/08/2012

Address of Record 11750 SW 40TH ST MIAMI, FL 33175

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

3663 S MIAMI AVE MIAMI, FL 33133

# 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	Effective License Date
ACLOQUE, GERARD FRANTZ JR	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	128734 04/01/2021

Name	Relationship	Profession	License	Effective Date
GONZALEZ-PANTALEON, JOSE	SUPERVISING PRESCRIBING	MEDICAL	86707	02/19/2018
ADALBERTO	PRACTITIONER	DOCTOR		

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

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