# SIMON FARID SHAKAR

## License Number: ME121217

Data As Of 9/12/2025		
Profession	Medical Doctor	
License	ME121217	
License Status	Clear/Active	
License Expiration Date	1/31/2027	
License Original Issue Date	08/06/2014	
Address of Record	2415 NORTH ORANGE AVENUE	
	SUITE 700	
	MAIL BOX 198	
	ORLANDO, FL 32804	
Controlled Substance Prescriber	No	
(for the Treatment of Chronic Non-		
malignant Pain)		
Discipline on File	No	
Public Complaint	No	

### **Secondary Locations**

Address 2501 N. Orange Ave. Ste 540 ORLANDO, FL 32804

# 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
LEDZIAN, BRADFORD GREGORY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107190 5/5/2017

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

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