GERARDO REYES

License Number: ME123613

Data As Of 8/21/2025

Profession Medical Doctor
License ME123613
License Status Clear/Active
License Expiration Date 1/31/2027
License Original Issue Date 04/03/2015

Address of Record

This practitioner does not have an address of record on file with the department. If

you have any questions, please contact the department at (850) 488-0595.

Address of Record NOT PRACTICING

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

No secondary locations found.

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
CHEVALIER, MICAH	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115309	3/2/2022
GONZALES, CHRISTINA GRANADO	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9117540	9/1/2023
MARAFFA, ASHLEY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115191	10/21/2021

Name	Relationship	Profession	License Effective Date
SUFYAN, BASHEER SAID	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9114105 10/21/2021

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.