



## ALBERT BEGAS

License Number: ME50627

Data As Of 12/3/2024

Profession	Medical Doctor
License	ME50627
License Status	CLEAR/Active
License Expiration Date	1/31/2026
License Original Issue Date	06/30/1987
Address of Record	701 NORTHWEST 13TH STREET 2ND FLOOR BOCA RATON, FL 33486
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

6282 LINTON BLVD.  
DELRAY BEACH, FL 33484

### 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	Effective License Date
BRCH ONCOLOGY, LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3417 3/10/2010

Name	Relationship	Profession	License	Effective Date
BRCH ONCOLOGY, LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3418	3/10/2010
BRCH ONCOLOGY, LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3416	3/10/2010
SAMOTOWKA, MICHAEL ALEXANDER	PRESCRIBING PHYSICIAN ASSISTANT	MEDICAL DOCTOR	133082	6/8/2021

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.