ANTHONY J MALDONADO

License Number: PS54504

Data As Of 8/7/2025

Profession Pharmacist License PS54504 License Status Clear/Active

Qualifications Certified To Administer Immunizations Collaborative Practice Certification

Test and Treat Certification

License Expiration Date

9/30/2025 License Original Issue

Date

Address of Record 2921 S. Orlando Drive

> STE 130 Sanford

01/07/2016

ORLANDO, FL 32773

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
DINOWITZ, SETH MD	TTC SUPERVISING PHYSICIAN	MEDICAL DOCTOR	139021	11/29/2021

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
BUENO PHARMACY LLC	PDM/CORSUBORDINATE	PHARMACY	31155	1/11/2018

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

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