THOMAS MICHAEL STEED M.D.

License Number: ME71508

Data As Of 9/7/2025			
Profession	Medical Doctor		
License	ME71508		
License Status	Clear/Active		
Qualifications	Dispensing Practitioner		
License Expiration Date	1/31/2027		
License Original Issue Date	09/11/1996		
Address of Record	14100 SW 136TH STREET		
	MIAMI, FL 33186		
Controlled Substance Prescriber	Yes		
(for the Treatment of Chronic Non-			
malignant Pain)			
Discipline on File	No		
Public Complaint	No		

Secondary Locations

Address

13001 N KENDALL DRIVE MIAMI, FL 33186 Address 8750 S.W. 144 STREET MIAMI, FL 33176 Address 8840 BIRD ROAD MIAMI, FL 33165 Address 14660 S.W. 8TH STREET MIAMI, FL 33184 Address 13500 S.W. 152 STREET MIAMI, FL 33177 Address 14661 S.W. 56TH STREET BAPTIST HEALTH UC/KENDALE LAKES MIAMI, FL 33175 Address 11805 S. DIXIE HIGHWAY BAPTIST HEALTH UC/PINECREST

MIAMI, FL 33156

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases No Discipline Found

Public Complaints

No Public Complaint Found

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
ALVAREZ-JACINTO, MANUEL	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109866	12/14/2016
ALVAREZ-JACINTO, MANUEL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109866	12/19/2016
FLORIDA KEYS AMBULANCE	SERVICE PROVIDER	EMS SERVICE PROVIDER ALS	4411	9/25/2012
PERERA, ALEXIS MD	DISPENSING PHYSICIAN ASSISTANT	MEDICAL DOCTOR	97052	4/28/2016

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.