



## JORGE RODRIGUEZ

### License Number: ME80730

Data As Of 4/27/2026

Profession	Medical Doctor
License	ME80730
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	07/11/2000
Address of Record	8900 CORAL WAY SUITE 103 MIAMI, FL 33165
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

1240 S. DIXIE HWY BAPTIST MED PLAZA AT UNIVERSITY (UUC)  
CORAL GABLES, FL 33146

#### Address

10 GIRALDA AVENUE BAPTIST MED PLAZA AT CORAL SPRINGS (GUC)  
CORAL GABLES, FL 33134

#### Address

15885 PINES BLVD  
PEMBROKE PINES, FL 33027

#### Address

4741 S UNIVERSITY DRIVE  
DAVIE, FL 33328

#### Address

6264 W. SAMPLE RD., STE 100  
CORAL SPRINGS, FL 33067

#### Address

14701 NW 77TH AVENUE STREET BAPTIST MEDICAL PLAZA AT MIAMI LAKES  
MIAMI, FL 33014

#### Address

9915 NW 41ST STREET BAPTIST MEDICAL PLAZA AT DORAL  
MIAMI, FL 33178

### 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
BOGDANOVA, ANNA L	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105154	6/29/2016
BOGDANOVA, ANNA L	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105154	7/19/2016
GOMEZ YATES, JESSICA GABRIELLE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106649	6/27/2016
GOMEZ YATES, JESSICA GABRIELLE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106649	7/8/2016
GUERRERO, JORGE ALBERT	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104178	6/28/2016
GUERRERO, JORGE ALBERT	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104178	6/27/2016
STEWART, MARKIRA OLGA	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107494	6/23/2016
STEWART, MARKIRA OLGA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107494	7/13/2016
SUKHWANI, ARTI V	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9100958	6/27/2016
SUKHWANI, ARTI V	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9100958	7/28/2016
ZAPATA, DARIO HERMAN	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103082	6/23/2016
ZAPATA, DARIO HERMAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103082	7/6/2016

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

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