Florida HEALTH Department of Health

ABDUL SAMAD MEMON

License Number: PA9105666

Data As Of 10/29/2026

Profession	Physician Assistant
License	PA9105666
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	09/21/2010
Address of Record	14150 SW 136 Street BHEC at Country Walk MIAMI, FL 33196
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address
14591 SW 26th Street BHEC at Coral Way West
MIAMI, FL 33175

Address
13500 SW 152ND ST BMP AT Country Walk
MIAMI, FL 33177

Address
8750 SW 144TH ST BMP at Palmetto Bay
MIAMI, FL 33176

Address
14660 SW 8TH ST BMP at Tamiami
MIAMI, FL 33184

Address
8840 BIRD RD BMP at Westchester
MIAMI, FL 33165

Address
11805 S DIXIE HIGHWAY BHUC at Pinecrest
MIAMI, FL 33156

Address
14661 SW 56TH ST BHUC at Kendale Lakes
MIAMI, FL 33175

Address
13001 N KENDALL DRIVE BHUC at West Kendall
MIAMI, FL 33186

Address
9520 NW 58th Street BHEC 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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
AVILA ZAMORA, OCTAVIO	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	123042	04/01/2016
AVILA ZAMORA, OCTAVIO	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	123042	05/10/2016
MORONO-PONCE, IDAYLIS	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	102072	04/01/2016
MORONO-PONCE, IDAYLIS	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	102072	05/10/2016
PONCE DE LEON, MERCEDES	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	122121	04/01/2016
PONCE DE LEON, MERCEDES	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	122121	05/10/2016

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

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