Florida HEALTH Department of Health

AILEEN CACERES

License Number: ME98869

Data As Of 10/29/2026

Profession	Medical Doctor
License	ME98869
License Status	Clear/Active
License Expiration Date	1/31/2027
License Original Issue Date	06/06/2007
Address of Record	1136 Cypress Glen Circle KISSIMMEE, FL 34741
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Authorized to Order (Medical and Low-THC Cannabis)	Yes
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

7300 Sandlake Commons Blvd ste 100
ORLANDO, FL 32819

Address

1138 Cypress Glen Circle
KISSIMMEE, FL 34741

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
BEHRMANN, DONALD LEE	SUBORDINATE	MEDICAL DOCTOR	64819	8/1/2017
REJUV COSMETIC SURGERY INSTITUTE AND SPA	ELECTROLYSIS FACILITIES	ELECTROLYSIS FACILITY	1663	4/19/2024

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

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