IMTIAZ HAROON MEMON

License Number: PA9106741

Data As Of 9/9/2025

Profession Physician Assistant

License PA9106741
License Status Clear/Active
Qualifications Prescribing
License Expiration Date 1/31/2026
License Original Issue Date 08/27/2012

Address of Record 12950 Race track road TAMPA, FL 33626

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File Yes
Public Complaint Yes

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case#	Action Taken
MEMON, IMTIAZ HAROOI	N 9106741	PHYSICIAN ASSIS	TAMPA	FL	201909592	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case#	Action Taken
MEMON, IMTIAZ HAROO	N 9106741	PHYSICIAN	TAMPA	FL	201909592	AC FILED
		ASSISTANT				

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
DESHAIES, MARC RAYMOND	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	89798	05/13/2025

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

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