

FILED
DEPARTMENT OF HEALTH
DEPUTY CLERK
CLERK Neother Column
DATE 5-4-04

Jeb Bush Governor

John O. Agwunobi, M.D., M.B.A. Secretary

## UNIFORM NON-DISCIPLINARY CITATION

		<b>BOARD OF</b>	MEDICINE		
Issued to:	Jose Lopez 782 N.W. 42 <sup>nd</sup> Ave	Cuita 242	Citation Number:	200403702	
		Suite 343	Case Number:	2004037021	-
License Nu	Miami, FL mber: 55324		Date of Violation: Profession:	Nov. 19, 2003 1501	
ollowing pro ines or cos oursuant to f	vision(s) of S. 456.0 ts imposed by the E Rule 64B8-017 (3)(ia)	er 19, 2003, the 172, F.S. by com <b>3oard of Medic</b> 1 <b>(1)</b> Florida Adm	ed hereby certifies that above referenced subj mitting the following actine. inistrative Code, the Bo provision: \$ 125.98 pl	ect did violate the xt(s): Failure to pay pard/Department has s	iei
On behalf of: SSUED this by:	John O Agwanobi 9th day of February,	M.D. M.B.A. Se 2004	cretary	OL APR 28	OKSUITE IN THE
Fom Alba	nese, Investigation S	Specialist II		35	
pe filed as a icense. If you cost is due the odispute this	final order of the boa u accept this citation nirty (30) days from t s citation you must d ertified mail to the foll	ard but will not be the date the cital to so in writing. owing address:	days of service, the cit e considered disciplinal s a final order and total tion is filed and become Send the written disput	ry action against your payment of fine and es a final order. In ordet eand a copy of the	
	40		onsumer Services Unit s Way Bin C#75 da 32399-3275		
456.073 Flori hese charge presented to probable cau	ida Statutes, <u>rather:</u> s prosecuted pursua the appropriate prob	han accept this ant to section 450 able cause pan and that if you ch	as a disciplinary action citation. In the event the 6.073 Florida Statutes, el or the Department fo	nat you elect to have the case will be or a determination of	e
	PLEASE CHE	CK ONE OF TH	E FOLLOWING AND	SIGN:	
<u>-/(1)</u>	CHOOSE TO ACCE	PT THE NON-D	SCIPLINARY CITATION	NC	
ΓΟ HAVE TH Signed:	HS CASE PROSEC	JTED UNDER S	ON-DISCIPLINARY C SECTION, 456,073, FL Date:	ORIDA STATUTES.	
	1	f	1		

## IMPORTANT INFORMATION REGARDING COMPLIANCE WITH THIS NON-DISCIPLINARY CITATION

This citation automatically becomes a final order of the board if you do not dispute the citation within thirty (30) days of the date the citation was served. All fines and costs are due thirty (30) days from the date the citation becomes a final order. Please attach a copy of the citation with your payment. Payment shall be mailed to the following address:

DOH/MQAMS/Client Services Post Office Box 6320 Tallahassee, Florida 32314-6320

Any continuing education requirements shall be completed within the timeframe specified in the citation and proof of compliance documented with the Department of Health. Proof of completion must be mailed to:

DOH/HMQAMS/Client Services Compliance - Bin C01 4052 Bald Cypress Way Tallahassee, Florida 32399-3251

After this citation becomes a final order, failure to pay the fine and costs specified and provide proof of required continuing education within the timeframe specified on this citation constitutes a violation of a final order of the board, and may subject you to disciplinary action and referral to a collection agency.

#### **CERTIFICATE OF SERVICE**

been served upon:	.,	0 0		
At: Slow Sul. 135 Ave, Mian.	Fla. 33183	- Suite 1	03	
By Personal Service ( ) U.S. Certific	ed Mail, Restricted	Delivery, this _	<u>26</u> da	У
	Signature	Valle	MI150	P
	Department of Hea	alth Representa	tíve	
	Philip	Mallee		

LHERERY CERTIFY that a true and correct conv of the foregoing Citation has



John O. Agwunobi, M.D., M.B.A.

# RECEIVED

### REQUEST FOR CITATION SERVICE

APR 32 2004

DOH/MIAMI INVESTIGATIVE SERVICES

To be completed by Consumer Services								
то:	Christie Jackson	,Investigative Ser	vices Field Office					
FROM:	Tom Albanese	, Consumer Servi	ces					
DATE:	_April 21, 2004							
hand serv	The attached citation was returned unclaimed. This is to request that an investigator hand serve the citation, complete the certificate of service portion on the back of the citation and return a copy to me.							
To the completed by Investigative Services								
TO:	Jon ALBONESE	, Consumer Serv	ices					
FROM:	Philip Valles	, Investigative Se	rvices Field Office					
DATE:	4/26/04							
The citation has been served and the completed certificate of service is attached.  The citation was not served. An affidavit of diligent search is attached.  Other  Investigator Signature  Date  Other  Date								

