STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965707	R **02/23/2017**
NAME OF PROVIDER OR SUPPLIER **SUNFLOWERS VILLAGE II**	STREET ADDRESS, CITY, STATE, ZIP CODE **13295 SW 99 TERRACE** **MIAMI, FL 33186**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

A Standard Biennial Revisit Survey was conducted on 02/23/2017. Sunflowers Village II, license #10066, had no deficiencies at time of the survey.