STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966515	R **03/20/2017**
NAME OF PROVIDER OR SUPPLIER **VILLA NORA #2**	STREET ADDRESS, CITY, STATE, ZIP CODE **998 WEST 31 STREET** **HIALEAH, FL 33012**	

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

0000 - Initial Comments

A Complaint (CCR#2017000193) Revisit Survey was conducted on March 20, 2017. Villa Nora #2 Inc had no deficiencies identified at time of the survey.