STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967294	**04/25/2017**
NAME OF PROVIDER OR SUPPLIER **MELBA COVE LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **267 MELBA AVENUE NW** **PALM BAY, FL 32907**	

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

0000 - Initial Comments

A complaint investigation #2017002021 was conducted on 04/25/2017. Melba Cove LLC, License#11340 had no deficiencies at the time of the visit.