

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/16/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966825	(X3) DATE SURVEY COMPLETED R 05/03/2017
NAME OF PROVIDER OR SUPPLIER MIRAMAR SENIOR LIVING III	STREET ADDRESS, CITY, STATE, ZIP CODE 15242 SW 16TH TERRACE MIAMI, FL 33185	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An Abbreviated Biennial Second Revisit survey was conducted on 05/03/17. Miramar Senior Living III with a standard license #10972 had no deficiencies found at the time of the survey.		