STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911921	R **07/20/2017**
NAME OF PROVIDER OR SUPPLIER **GABRIELS' HOME ALF,INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **11232 SW 7TH ST** **MIAMI, FL 33174**	

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

0000 - Initial Comments

An Abbreviated Biennial 2nd Revisit Survey was conducted on 07/20/2017. Gabriels' Home ALF, License number 7810, had no deficiencies identified at the time of the visit.