

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 08/08/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967227	(X3) DATE SURVEY COMPLETED R 07/24/2017
NAME OF PROVIDER OR SUPPLIER J H PUIG INVESTMENTS INC	STREET ADDRESS, CITY, STATE, ZIP CODE 3144 SW 21 STREET MIAMI, FL 33145	

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

0000 - Initial Comments

A Complaint Survey (CCR# 2017002253) revisit, was conducted on 07/24/2017. J H Puig Investments Inc. (AL11319) with standard license had no deficiencies identified at time of the survey: