STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968989	R **08/01/2017**
NAME OF PROVIDER OR SUPPLIER **AMIGOS ALF HOMES CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **2710 SW 77TH CT** **MIAMI, FL 33155**	

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

0000 - Initial Comments

A Wellness Monitoring Survey Revisit was conducted on August 01, 2017. Amigos ALF Homes Corp. (License # 12860) had no deficiencies identified at the time of the survey.

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968989	R **08/01/2017**
NAME OF PROVIDER OR SUPPLIER **AMIGOS ALF HOMES CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **2710 SW 77TH CT** **MIAMI, FL 33155**	

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

0000 - Initial Comments

A Wellness Monitoring Survey Revisit was conducted on August 01, 2017. Amigos ALF Homes Corp. (License # 12860) had no deficiencies identified at the time of the survey.