STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966967	R **08/15/2017**
NAME OF PROVIDER OR SUPPLIER **NATALIA ALF INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2118 SW151 PLACE** **MIAMI, FL 33185**	

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

0000 - Initial Comments

A standard biennial revisit survey was conducted on August 15th, 2017. Natalia Alf Inc, license number 11084, had no deficiencies identified at the time of the survey.