STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967989	R **09/19/2017**
NAME OF PROVIDER OR SUPPLIER **ADVENT SQUARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **4798 NORTH DIXIE HIGHWAY** **BOCA RATON, FL 33431**	

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

0000 - Initial Comments

A complaint survey revisit was conducted by desk review on 09/19/2017 for Licensure complaint survey, CCR#2017005077, for Advent Square, License #11947. There were no uncorrected or new deficiencies found at the time of the desk review.