STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966555	**09/05/2017**
NAME OF PROVIDER OR SUPPLIER **VICTORIA RETIREMENT HOME, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3755 NW 13 ST** **MIAMI, FL 33126**	

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

0000 - Initial Comments

A Standard Biennial survey was conducted on 09/05/17. Victoria Retirement Home, Inc with a standard license #12041 had no deficiencies found at the time of the survey.