STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967009	R **09/26/2017**
NAME OF PROVIDER OR SUPPLIER **VEREDA NUEVA**	STREET ADDRESS, CITY, STATE, ZIP CODE **12412 SW 215 LANE** **MIAMI, FL 33177**	

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

0000 - Initial Comments

A Standard Biennial survey revisit was conducted on 09/26/2017. Vereda Nueva (AI 11112) had no deficiencies identified at time of the survey.

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