STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967003	R **10/19/2017**
NAME OF PROVIDER OR SUPPLIER **MIRAMAR SENIOR LIVING VI, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **15364 SW 10TH STREET** **MIAMI, FL 33194**	

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

0000 - Initial Comments

A Standard Biennial Revisit Survey was conducted on 10/19/2017. Miramar Senior Living VI had no deficiencies identified at time of the survey.