STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968390	R **11/29/2017**
NAME OF PROVIDER OR SUPPLIER **MERLOX HAVEN LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3151 GRANADA BLVD** **KISSIMMEE, FL 34746**	

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

0000 - Initial Comments

A revisit to a capacity increase survey was conducted on 11/29/2017. Merlox Haven, license #12291, had no deficiencies at the time of the visit.