STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968154	R **02/27/2018**
NAME OF PROVIDER OR SUPPLIER **HEBERT INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1101 NW 26 AVENUE ROAD** **MIAMI, FL 33125**	

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

0000 - Initial Comments

An unannounced Complaint 2nd Revisit Survey (CCR# 2017009810) was conducted on 02/27/2018.
Hebert, Inc (license #12177) had no deficiencies at time of the survey: