

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/02/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968209	(X3) DATE SURVEY COMPLETED R 03/21/2018
NAME OF PROVIDER OR SUPPLIER ELITE MANOR INC	STREET ADDRESS, CITY, STATE, ZIP CODE 22022 MARTELLA AVE BOCA RATON, FL 33433	

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

0000 - Initial Comments

A relicensure revisit survey conducted by desk review was completed on 03/21/2018 for Elite Manor Inc, License #12156. All outstanding deficiencies were completed.