STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969098	R **03/29/2018**
NAME OF PROVIDER OR SUPPLIER **NUEVO AMANECER TAMPA LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **7405 ARIPEKA DR** **TAMPA, FL 33619**	

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

0000 - Initial Comments

Assisted Living Facility

On 03/29/2018, an unannounced revisit to 01/18/2018 complaint survey (CCR#2017013085) was conducted at Nuevo Amanecer Tampa (License #13034), an Assisted Living Facility located in Tampa, Florida. There were no deficiencies identified during the survey.