STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964066	R **06/07/2018**
NAME OF PROVIDER OR SUPPLIER **GOD'S VIP SENIOR HAVEN LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **4681 SW 66TH AVENUE** **DAVIE, FL 33314**	

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

0000 - Initial Comments

An unannounced CHOW revisit survey was completed by desk review on 06/07/2018 at God's VIP Senior Haven (Lic#5448). The facility corrected all previously cited deficiencies.