STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963738	R **07/06/2018**
NAME OF PROVIDER OR SUPPLIER **HOGAR DE AMABLE CONSUELO CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **134 W 59TH STREET** **HIALEAH, FL 33012**	

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

0000 - Initial Comments

A Standard Biennial Survey Revisit was conducted on July 06, 2018. Hogar De Amable Consuelo Corp, license #8745, had no deficiencies identified at the time of the survey.