STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969050	R **08/13/2018**
NAME OF PROVIDER OR SUPPLIER **KEVIN'S ALF CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **5111 SW 112 AVE** **MIAMI, FL 33165**	

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

0000 - Initial Comments

A Standard Biennial Re-Visit Survey was conducted on 08/13/18. Kevin's ALF Corp. with a Standard Licence #12900, had no deficiencies found at the time of the survey.