STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969229	R **08/24/2018**
NAME OF PROVIDER OR SUPPLIER **ABUELOS ALF INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1031 NW 39 CT** **MIAMI, FL 33126**	

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

0000 - Initial Comments

A Complaint Revisit Survey CCR # 2018005882 was conducted on 08/24/2018. Abuelos's ALF Inc (License #10737) had no deficiencies identified at the time of the survey: