STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965896	R **08/20/2018**
NAME OF PROVIDER OR SUPPLIER **CORAL VILLA ADULT CARE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2860 SW 122 AVENUE** **MIAMI, FL 33175**	

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

0000 - Initial Comments

A Standard Biennial Survey Revisit was conducted on August 20, 2018. Coral Villa Adult Care Inc. with a Standard Licence #10206, had no deficiencies found at the time of the survey.