STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966671	R **08/24/2018**
NAME OF PROVIDER OR SUPPLIER **NUEVO RENACER ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **540 NORTH PERVIZ AVENUE** **OPA LOCKA, FL 33054**	

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

0000 - Initial Comments

A Standard Biennial Second Revisit and Generator monitoring survey was conducted on August 24, 2018. Nuevo Renacer ALF, Corp (license #10831) with Limited Mental Health component had no deficiencies identified at time of the survey.