STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967860	R **09/20/2018**
NAME OF PROVIDER OR SUPPLIER **MIAMI COMFORT COVE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3511 N W 11 COURT** **MIAMI, FL 33127**	

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

0000 - Initial Comments

A Second Follow Up Visit to a Complaint (CCR#2018008172) survey was conducted on 09/19/18 and concluded on 09/20/18. Miami Comfort Cove, Inc. (license #11869) did not have deficiencies identified found at the time of the survey.

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