STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967824	R **08/23/2018**
NAME OF PROVIDER OR SUPPLIER **ALFONSO'S ALF INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **17010 SW 100 AVENUE** **MIAMI, FL 33157**	

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

0000 - Initial Comments

A Complaint CCR# 2018008106) Revisit Survey was conducted on 08/23/2018 & 09/07/2018. Alfonso's ALF (license #11816) had no deficiencies identified at the time of the survey: