STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965702	**10/18/2018**
NAME OF PROVIDER OR SUPPLIER **AMOR DE DIOS**	STREET ADDRESS, CITY, STATE, ZIP CODE **718 NW 132 PLACE** **MIAMI, FL 33182**	

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

0000 - Initial Comments

A Complaint Investigation (CCR 2018013456) in conjunction with a Standard Biennial Survey were conducted from 09/25/18 through 10/18/18. Amor De Dios (License #10069) had deficiencies identified at the time of the surveys, cited under the biennial survey.