

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 11/20/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967867	(X3) DATE SURVEY COMPLETED R 10/24/2018
NAME OF PROVIDER OR SUPPLIER ANA'S ELDERLY CARE INC	STREET ADDRESS, CITY, STATE, ZIP CODE 3720 SW 132 AVENUE MIAMI, FL 33175	

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

0000 - Initial Comments

A Standard Biennial Survey Second Revisit was conducted on 10/24/2018. Ana's Elderly Care Inc (License # 11873) had no deficiencies identified at the time of the survey: