

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 12/26/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966756	(X3) DATE SURVEY COMPLETED R 10/18/2018
NAME OF PROVIDER OR SUPPLIER RITA MARIA GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 15348 S W 33 LANE MIAMI, FL 33185	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A Complaint Survey (#2018013167) revisit was conducted on 10/18/2018. Rita Maria Group Home, Inc. (License #10908) had no deficiencies found at the time of the survey.		