

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/05/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11911449	(X3) DATE SURVEY COMPLETED R 02/18/2019
NAME OF PROVIDER OR SUPPLIER PLAZA OF HALLANDALE BEACH	STREET ADDRESS, CITY, STATE, ZIP CODE 3535 SW 52ND AVENUE PEMBROKE PARK, FL 33023	

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

0000 - Initial Comments

An unannounced licensure Change of Ownership (CHOW) revisit survey was conducted on 02/18/2019 at Plaza of Hallandale Beach, License # 5120. The previously cited deficiencies were found corrected at the time of the survey.