STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966825	R **03/20/2019**
NAME OF PROVIDER OR SUPPLIER **MIRAMAR SENIOR LIVING III**	STREET ADDRESS, CITY, STATE, ZIP CODE **15242 SW 16TH TERRACE** **MIAMI, FL 33185**	

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

0000 - Initial Comments

A Standard Biennial survey second revisit was conducted on 03/20/2019. Miramar Senior Living III had no deficiencies identified at time of the survey.