

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/12/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968209	(X3) DATE SURVEY COMPLETED R 03/27/2019
NAME OF PROVIDER OR SUPPLIER ELITE MANOR INC	STREET ADDRESS, CITY, STATE, ZIP CODE 22022 MARTELLA AVE BOCA RATON, FL 33433	

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

0000 - Initial Comments

A revisit to the licensure complaint survey, CCR #2018016676 was conducted by desk review on 03/27/2019 for Elite Manor Inc, License #12156. The previously cited deficiency was found corrected at the time of the survey.