STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966896	R **04/12/2019**
NAME OF PROVIDER OR SUPPLIER **KAYLA'S PLACE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3122 SW 151 COURT** **MIAMI, FL 33185**	

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

0000 - Initial Comments

A revisit to a biennial Survey was conducted at Kayla's Place Inc. on April 12, 2019. There were no deficiencies identified at the time of the survey.