STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968028	R **05/20/2019**
NAME OF PROVIDER OR SUPPLIER **K'S HAVEN, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **7813 SW 8TH COURT** **NORTH LAUDERDALE, FL 33068**	

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

0000 - Initial Comments

A revisit to the Relicensure survey was conducted as a desk review for K's Haven, Inc on 05/17/2019 and 05/20/2019 . The previously cited decificiencies were found corrected at the time of the survey.