

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/18/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968775	(X3) DATE SURVEY COMPLETED 06/02/2019
NAME OF PROVIDER OR SUPPLIER LA VIDA EN EL MAR ALF INC	STREET ADDRESS, CITY, STATE, ZIP CODE 6802 ROSEWOOD CT TAMPA, FL 33615	

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

0000 - Initial Comments

A Monitoring Visit was conducted at La Vida En El Mar Assisted Living Facility on 06/02/2019.