

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/09/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966626	(X3) DATE SURVEY COMPLETED R 06/07/2017
NAME OF PROVIDER OR SUPPLIER PARADISE VILLA RETIREMENT AT SHERIDAN #V	STREET ADDRESS, CITY, STATE, ZIP CODE 11330 SHERIDAN STREET PEMBROKE PINES, FL 33028	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		

0000 - Initial Comments

A desk review revisit to the relicensure survey was conducted on 06/07/2017 for Paradise Villa Retirement at Sheridan Assisted Living Facility located in Pembroke Pines FL, License # 11017. The facility had no deficiencies at the time of the visit.