STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968483	**05/22/2018**
NAME OF PROVIDER OR SUPPLIER **SONATA VIERA**	STREET ADDRESS, CITY, STATE, ZIP CODE **3325 BRESLAY DR** **MELBOURNE, FL 32940**	

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

0000 - Initial Comments

Complaint Investigation #2018004056 was conducted on 5/22/18. Sonata Viera ALF, License #12361, did not have any deficiencies found at the time of the visit.