STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967485	**08/09/2018**
NAME OF PROVIDER OR SUPPLIER **TWO SISTERS LOVE & CARE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **54-56 NW 45TH AVENUE** **MIAMI, FL 33126**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on 08/09/18. Two Sisters Love & Care Inc. (License #11500) had no deficiencies found at the time of the survey.