STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911749	**03/26/2019**
NAME OF PROVIDER OR SUPPLIER **PRESERVE AT PALM AIRE (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **3701 MCNAB ROAD** **POMPANO BEACH, FL 33069**	

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

0000 - Initial Comments

An unannounced licensure complaint survey, CCR #2019001420 was conducted on [redacted] and [redacted] at The Preserve At Palm Aire, License #7693. The facility had no deficiencies at the time of the survey.

(An unannounced Relicensure survey was conducted in conjunction with the above licensure complaint survey. Please see separate report for findings.)