

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT
FOOD SERVICE
INSPECTION REPORT**



PURPOSE:

NAME OF ESTABLISHMENT Southwest Miami Senior High School
ADDRESS 8855 SW 50 TER **CITY** MIAMI
OWNER MDCPS **ZIP** 33165
PERSON IN CHARGE Carlos A. Diaz **PHONE** (305) 274 0181

RESULTS

- Satisfactory
- Incomplete
- Unsatisfactory
- Critical Violations by
- Next Inspection
- 90 DAY PLAN

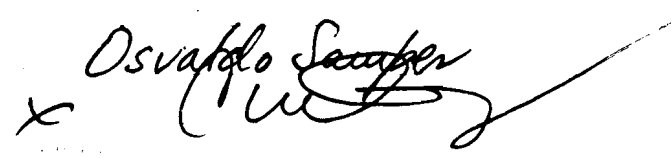
BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE	DATE
1145	1245	032212	67699	13-48-12952		

Items marked below violate the requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued operation of this facility without making these corrections is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381, and 386, Florida Statutes. Violations must be corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.

- | | | | |
|------------------------|---------------------------|---|--|
| FOOD SUPPLIES | PERSONNEL | SANITARY FACILITIES AND CONTROLS | OTHER FACILITIES AND OPERATIONS |
| FOOD PROTECTION | EQUIPMENT/UTENSILS | TEMPORARY FOOD SERVICE EVENTS | MANAGER CERTIFICATION |
| | | VENDING MACHINES | CERTIFICATES AND FEES |
| | | | INSPECTION/ENFORCEMENT |

ITEM NUMBERS **COMMENTS AND INSTRUCTIONS**
(continue on attached sheet)

39 Clean the kitchen's wall fans.
 39 Replace broken cover (protector) of a light fixture in the dining room.


 (305) 6233500
 03/22/2012

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT**



PURPOSE:

**FOOD SERVICE
INSPECTION REPORT**

NAME OF ESTABLISHMENT Southwest Miami Senior High School #2
ADDRESS 8855 SW 50 TER **CITY** MIAMI
OWNER MDCPS **ZIP** 33165
PERSON IN CHARGE Carlos A. Diaz **PHONE** (305) 274 0181

RESULTS

- Satisfactory
- Incomplete
- Not Inspected
- Not Inspected by
- Not Inspected
- Not Inspected

BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE	DATE
1245	100	03/22/12	67699	13-48-		
1:00	1:00	0	0	0		0
2:00	2:00	1	1	1		1
3:00	3:00	2	2	2		2
4:00	4:00	3	3	3		3
5:00	5:00	4	4	4		4
6:00	6:00	5	5	5		5
7:00	7:00	6	6	6		6
8:00	8:00	7	7	7		7
9:00	9:00	8	8	8		8
10:00	10:00	9	9	9		9
11:00	11:00	10	10	10		10
12:00	12:00	11	11	11		11

Items marked below violate the requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued operation of the establishment without making these corrections is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381, and 386, Florida Statutes. Violations not corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.

FOOD SUPPLIES	PERSONNEL	SANITARY FACILITIES AND CONTROLS	OTHER FACILITIES AND OPERATIONS
FOOD PROTECTION	EQUIPMENT/UTENSILS	TEMPORARY FOOD SERVICE EVENTS	VENDING MACHINES
		MANAGER CERTIFICATION	CERTIFICATES AND FEES
		INSPECTION/ENFORCEMENT	

ITEM NUMBERS

COMMENTS AND INSTRUCTIONS
(continue on attached sheet)

Satisfactory

x Osvaldo Saubon

*(305) 623 3500
03/22/2012*

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT**



PURPOSE:

**FOOD SERVICE
INSPECTION REPORT**

- Routine
- Complaint
- Complaint
- Complaint
- Complaint

RESULTS

- Satisfactory
- Incomplete
- Unacceptable
- Unacceptable
- Unacceptable

NAME OF ESTABLISHMENT Southwest Miami Senior High School Annex
ADDRESS 8855 SW 50 TER **CITY** MIAMI
OWNER MDCPS **ZIP** 33165
PERSON IN CHARGE Carlos A. Diaz **PHONE** (305) 274 0181

BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE
105	145	032212	67699	13-48-18127	
1:00	2:00				
2:00	2:05				
3:10	3:10				
4:15	4:15				
5:20	5:20				
6:25	6:25				
7:30	7:30				
8:35	8:35				
9:40	9:40				
10:45	10:45				
11:50	11:50				
12:55	12:55				

DATE

Items marked below violate the requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued operation of this facility without these corrections is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381, and 386, Florida Statutes. Violations must be corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.

FOOD SUPPLIES	PERSONNEL	SANITARY FACILITIES AND CONTROLS	OTHER FACILITIES AND OPERATIONS
FOOD PROTECTION	EQUIPMENT/UTENSILS		TEMPORARY FOOD SERVICE EVENTS
			VENDING MACHINES
			MANAGER CERTIFICATION
			CERTIFICATES AND FEES
			INSPECTION/ENFORCEMENT

ITEM NUMBERS **COMMENTS AND INSTRUCTIONS**
(continue on attached sheet)

Satisfactory

Oswaldo Sampedro

*(305) 6233500
03/22/2012*

