



Florida Department of Agriculture and Consumer Services
Division of Food Safety

FOOD SAFETY INSPECTION REPORT

Visit #: 9999-7182-2355-62
Bureau of Food Inspection
Attention: Business Center
3125 Conner Boulevard, C-26
Tallahassee, FL 32399-1850

WILTON SIMPSON
COMMISSIONER

Chapter 500, Florida Statutes
(850) 245-5520

Name: Kwik Stop #7550
Owner: Nilkanth Enterprises Inc
Type: Convenience Store Limited FS
Address: 7550 Pembroke RD Miramar, FL 33023-2563

Establishment #: 380288
Date of Visit: November 14, 2023
Inspected By: SCOTT HOUSE

INSPECTION SUMMARY - Re-Inspection Required

The following violations observed during the inspection must be corrected to be in compliance with Chapter 500, 581, and 583, Florida Statutes, and Rule 5K-4, Florida Administrative Code. A Department inspector will return for a reinspection on about November 28, 2023. The failure to correct the violations by this date may result in the imposition of the maximum penalties provide in Chapter 500 Florida Statutes, including an administrative fine and the suspension or revocation of your food permit. The reinspection visit is due to documented citations that pose a risk of foodborne illness.

NOTICE OF FEES

To review your account balance or to renew your permit, please visit our Food Permit Center at <https://FoodPermit.FDACS.gov>.

OBSERVATIONS AND CORRECTIVE ACTIONS

COS = Corrected on Site

P = Priority Citation
(Directly Associated with Foodborne Illnesses)

Pf = Priority Foundation Citation
(Supports or Leads to a Priority)

INSPECTION: HEMP RETAIL

Violation No. Citation Description and Observation

COS

- 77 **Citation Description:** Distribution or sale of a hemp extract that is attractive to children in violation of s. 581.217(7)(e), F.S. The hemp extract product, or the package, label, or advertisement for the product, is in the shape of humans, cartoons, or animals; or bears any reasonable resemblance to an existing candy product that is familiar to the public as a widely distributed, branded food product such that a product could be mistaken for the branded product, especially by children; or the product contains any color additives.
Observation: Retail Area: Cured Bomb Desserts Peach Gummies, Delta-8 30 mg, 300mg total hemp, label is in the shape of a cartoon character, specifically "Smiley Faced Bomb and Smiley Faced Running Bar Characters". Hemp Cured Bomb Desserts Robot Gummies, Delta-8 150 mg, label is in the shape of a cartoon character, specifically "Smiley Faced Bomb, Smiley Faced Running Bar and Smiley Faced Robot Characters". COS: Product voluntarily discarded by person in charge at time of inspection. Stop-sale and release issued.

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INSPECTION: RISK BASED

Violation No. Citation Description and Observation

COS

- 2 **Citation Description:** Person in charge does not correctly respond to questions that relate to preventing transmission of foodborne disease by a food employee who has a disease or medical condition that may cause foodborne disease, can not describe symptoms associated with diseases that are transmissible through food, or can not explain how to comply with reporting responsibilities and exclusion or restriction of food employees. 2-102.11(C)(2)-(3) and (17) Pf
Observation: Person in charge at time of inspection could not answer questions that relate to foodborne illness.

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8
Pf **Citation Description:** Handwashing sink or group of 2 adjacent handwashing sinks not provided with hand cleaning liquid, powder, or bar soap. Handwashing sink or group of adjacent handwashing sinks not provided with: individual, disposable towels; continuous towel system that supplies the user with a clean towel; a heated-air hand drying device; or a device that employs an air-knife system that delivers high velocity, pressurized air at ambient temperatures. 6-301.11 and 6-301.12 Pf
Observation: Retail Area: Hand towels missing at hand sink adjacent to cashier. COS: provided at time of inspection.

Initial if all stated observations have been corrected: COS

8
Pf **Citation Description:** Handwashing sink not maintained so that it is accessible at all times for employee use or is used for purposes other than handwashing, or an automatic handwashing facility not used in accordance with manufacturer's instructions. 5-205.11 Pf

Observation: Retail Area: Hand sink located adjacent to cashier blocked by boxes of return items. Boxes properly stored at time of inspection.

Initial if all stated observations have been corrected: COS

24
Pf **Citation Description:** Establishment does not have written procedures for employees to follow when responding to an event that involves the discharge of vomitus or diarrhea onto surfaces at the food establishment, or procedures do not address specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter. 2-501.11 Pf

Observation: Person in charge at time of inspection could not show written employee procedures for cleanup of a vomit and diarrhea event.

Initial if all stated observations have been corrected: _____

26
Pf **Citation Description:** Working container of poisonous or toxic materials taken from a bulk supply not clearly and individually identified with the common name of the material. 7-102.11 Pf

Observation: Retail Area: Spray bottle of chemical cleaner under hand sink removed from bulk container missing label.

Initial if all stated observations have been corrected: _____

95 **Citation Description:** Establishment does not have a certified food protection manager who has passed a test through a recognized accredited program. 5K-4.021(1), F.A.C.

Observation: Establishment does not have a certified food protection manager.

Initial if all stated observations have been corrected: _____

INSPECTION: GRP

Violation No. Citation Description and Observation

COS

34
Pf **Citation Description:** Food temperature measuring device not provided or not readily accessible for use in ensuring food temperatures are attained and maintained; or food temperature measuring device with a suitable small-diameter probe not provided or not readily accessible to accurately measure the temperature in thin foods. 4-302.12 Pf

Observation: Retail Area: Establishment does not have a probe thermometer for accessing internal temperatures of foods.

Initial if all stated observations have been corrected: _____

34 **Citation Description:** Temperature measuring device sensor not located to measure the air temperature or a simulated product temperature in the warmest part of a mechanically refrigerated unit or in the coolest part of a hot food storage unit; cold or hot holding equipment used for time/temperature control for safety food not equipped with at least one integral or permanently affixed temperature measuring device that is located to allow easy viewing of the temperature display; or temperature measuring device not designed to be easily readable. 4-204.112(A), (B) and (D)

Observation: Backroom Area: Ambient air thermometer missing in walk in cooler.

Initial if all stated observations have been corrected: _____

36
P **Citation Description:** Premises not maintained free of roaches and rodents; or not controlled to eliminate their presence on the premise by routinely inspecting incoming shipments of food and supplies; routinely inspecting the premises for evidence of pests; and using methods, if pests are found, such as trapping devices or other means of pest control. 6-501.111 (A)-(C) P

Observation: Retail Area: Observed rodent excreta in cabinet under hand sink adjacent cashier counter. COS: Person in charge voluntarily cleared area of merchandise and thoroughly cleaned and sanitized area.

- 46 Pf **Citation Description:** Test kit or other device that accurately measures the concentration in MG/L of sanitizing solution not provided. 4-302.14 Pf ☐
Observation: Backroom Area: Chlorine sanitizer test strips not available at time of inspection.
Initial if all stated observations have been corrected: _____
- 46 **Citation Description:** Drainboards, utensil racks, or tables not large enough to accommodate all soiled and cleaned items that accumulate during hours of operation or not provided for necessary utensil holding before cleaning and after sanitizing. 4-301.13 ☐
Observation: Backroom Area: Drain Boards missing at ware wash sink
Initial if all stated observations have been corrected: _____
- 46 **Citation Description:** Warewashing equipment; sinks, basins or other receptacles used for washing or rinsing raw food or laundering wiping cloths; or drainboards or equipment used to substitute for drainboards not cleaned before use, throughout the day at a frequency necessary to prevent recontamination of equipment and utensils and ensure the equipment performs its intended function, and at least every 24 hours when used. 4-501.14 ☐
Observation: Backroom Area: Ware wash sink with soil build-up in basins and faucet.
Initial if all stated observations have been corrected: _____
- 47 **Citation Description:** Nonfood-contact surface of equipment has an accumulation of dust, dirt, food residue or other debris. 4-601.11(C) ☐
Observation: Retail Area: Reach in egg display cooler with food spillage and soil build-up under shelving.
Initial if all stated observations have been corrected: _____
- 49 Pf **Citation Description:** Plumbing system not installed to preclude backflow of a solid, liquid, or gas contaminant into the water supply system at each point of use, including on a hose bibb, by providing an air gap or installation of an approved backflow prevention device. 5-203.14 Pf ☐
Observation: Backroom Area: Threaded faucet at mop sink missing backflow prevention device.
Initial if all stated observations have been corrected: _____
- 51 **Citation Description:** Plumbing fixtures including but not limited to handwashing sinks, toilets and urinals not cleaned as often as necessary to keep them clean. 6-501.18 ☐
Observation: Retail Area: Hand sink located adjacent to cashier with soil build-up in basin and faucets.
Initial if all stated observations have been corrected: _____
- 51 **Citation Description:** Toilet room located inside the food establishment not completely enclosed or not provided with a tight-fitting self-closing door. 6-202.14 ☐
Observation: Backroom Area: Customer and employee restrooms missing self closer on door.
Initial if all stated observations have been corrected: _____
- 51 **Citation Description:** Toilet room used by females not provided with a covered receptacle for sanitary napkins. 5-501.17 ☐
Observation: Backroom Area: Customer and employee unisex restrooms missing covered trash can.
Initial if all stated observations have been corrected: _____
- 52 **Citation Description:** Storage area or enclosure for refuse, recyclables, or returnables not clean. 5-501.115 ☐
Observation: Outside Area: Dumpster enclosure with trash build-up on grounds throughout.
Initial if all stated observations have been corrected: _____
- 52 **Citation Description:** Receptacles and waste handling units for refuse, recyclables, and returnables not kept covered with tight-fitting lids or doors when located outdoors; or indoor receptacles that contain food not kept covered when not in continuous use or after they are filled. 5-501.113 ☐
Observation: Outside Area: Dumpster uncovered and full.
Initial if all stated observations have been corrected: _____
- 52 **Citation Description:** Waste receptacle not provided in each area where refuse is generated or commonly discarded, or where recyclables or returnables are placed, or at each lavatory or group of adjacent lavatories where disposable towels are used at handwashing lavatories. 5-501.16(B)-(C) ☐
Observation: Retail Area: Trash can not provided at hand sink adjacent to cashier.
Initial if all stated observations have been corrected: _____

53 Citation Description: Premises not free of litter and items that are unnecessary to the operation or maintenance of the establishment such as equipment that is nonfunctional or no longer used. 6-501.114
Observation: Backroom Area: Idle broken ice machine, cooler and deli slicer stored dirty adjacent to ware wash sink.
Initial if all stated observations have been corrected: _____ ☐

53 Citation Description: Physical facilities not cleaned as often as necessary to keep them clean, or cleaning not done during periods when the least amount of food is exposed such as after closing. 6-501.12
Observation: Backroom Area: Soil build-up on floors and under equipment and shelving in dry storage room, walk in cooler and restrooms.
Initial if all stated observations have been corrected: _____ ☐

A Supplemental Report was also issued during the visit which includes important information for management.

COMMENTS

When citations have been corrected and initialed, an electronic copy of the completed report may be emailed to FoodSafety@FDACS.gov.

Please note each observation that has been corrected.

Re-inspection visit required due to pests. Food Establishment Must Develop And Implement a pest management control program.

Re-inspection visit required issued for food establishment. A re-inspection will be conducted on or about 14 days.

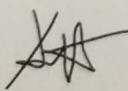
If evidence of pest infestation is observed on the next inspection, a Stop-Use Order will be issued on all receiving areas of the establishment and the establishment will no longer be allowed to receive additional food items, a Stop-Use Order of all processing equipment will be issued and a Stop-Sale Order of all exposed food items will be issued until the infestation is eradicated.

A copy of the Pest Control Plan Checklist has been provided to the establishment.

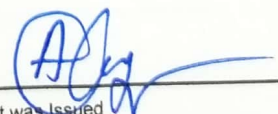
Guidance for Written Procedures for the Clean-up of Vomit and Diarrheal event business resource provided.

Employee Health Guidelines and reporting agreement provided.

A copy of this report has been provided to the person in charge of the food establishment and will be available online at <https://foodpermit.fdacs.gov/Reports/SearchFoodEntity.aspx>.


SCOTT HOUSE, SANITATION AND SAFETY SPECIALIST

ANJAN ROY, PERSON IN CHARGE


Name and Title of Whom This Report was Issued

Print Date: 11/14/2023



WILTON SIMPSON
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Food Safety

FOOD SAFETY INSPECTION SUPPLEMENTAL REPORT

Florida Statutes, Chapter 500.172, 500.174
(850) 245-5520

Bureau of Food Inspection
Attention: Business Center
3125 Conner Boulevard, C-26
Tallahassee, FL 32399-1650

Visit #: 99997182235562

Food Entity #: 380288
Food Entity Name: KWIK STOP #7550
Date Of Visit: November 14, 2023
Inspected By: SCOTT HOUSE
Food Entity Location Address: 7550 Pembroke RD Miramar, FL 33023-2563
Food Entity Mailing Address: 7550 Pembroke RD Miramar, FL 33023-2563
Food Entity Type/Description: 123/Convenience Store Limited FS
Food Entity Owner: NILKANTH ENTERPRISES INC

STOP SALE ORDER AND RELEASE

SUPPLEMENTAL KEY #:
334092

You are hereby notified that the following item on which a STOP SALE ORDER AND RELEASE was issued on 11/14/2023 by SCOTT HOUSE is hereby released.

Article: Cured Bomb Desserts Robot Gummies Delta 8 150 mg
Brand Name: Cured Bomb Desserts
Lot #: MFG 07/22 # Of Pkgs: 17 Size Of Pkg: 1
LOT: Cy1801

Total Weight: Unknown
Invoice #: Not Available
Invoice Date:

Manufacturer: Cured Bomb Desserts Miami, Florida 33138
Distributor: Cured Bomb Desserts Miami, Florida 33138

The primary reason and condition that caused the product or equipment stop sale or stop use and determined to be Attractive to Children was: FS 581.217 Distribution and Retail Sale of Hemp Extract. * Attractive to Children.

Disposition: Product was voluntarily destroyed by food entity management and witnessed by inspector.

Comments: The Food Establishment voluntarily agrees to release the products listed in this stop-sale order for destruction. The Food Establishment will not hold the Department liable for any lost revenue or income as a result of the destruction.

WILTON SIMPSON
COMMISSIONERFlorida Department of Agriculture and Consumer Services
Division of Food Safety

FOOD SAFETY INSPECTION SUPPLEMENTAL REPORT

Florida Statutes, Chapter 500.172, 500.174
(850) 245-5520Bureau of Food Inspection
Attention: Business Center
3125 Conner Boulevard, C-25
Tallahassee, FL 32399-1650

Food Entity #: 380288
Food Entity Name: KWIK STOP #7550
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Inspected By: SCOTT HOUSE
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Food Entity Owner: NILKANTH ENTERPRISES INC

Visit #: 99997182235562

STOP SALE ORDER AND RELEASE

SUPPLEMENTAL KEY #:
334092

You are hereby notified that the following item on which a STOP SALE ORDER AND RELEASE was issued on 11/14/2023 by SCOTT HOUSE is hereby released.

Article: Cured Bomb Deserts Peach Gummies Delta 8 30 mg.
Brand Name: Cured Bomb Deserts
Lot #: Lot 099997 # Of Pkgs: 4
EXP 10/24 Size Of Pkg: Unknown

Total Weight: Unknown
Invoice #: Not Available
Invoice Date:

Manufacturer: Hemp Cured Bomb Desserts Miami, Florida 33138
Distributor: Hemp Cured Bomb Desserts Miami, Florida 33138

The primary reason and condition that caused the product or equipment stop sale or stop use and determined to be Attractive to Children was: FS 581.217 Distribution and Retail Sale of Hemp Extract. * Attractive to Children.

Disposition: Product was voluntarily destroyed by food entity management and witnessed by inspector.

Comments: The Food Establishment voluntarily agrees to release the products listed in this stop-sale order for destruction. The Food Establishment will not hold the Department liable for any lost revenue or income as a result of the destruction.

When the department or its duly authorized agent finds, or has probable cause to believe, that any food or food-processing equipment is in violation of this chapter or any rule adopted under this chapter so as to be dangerous, unwholesome, fraudulent, or insanitary within the meaning of this chapter, an agent of the department may issue and enforce a stop-sale, stop-use, removal, or hold order, which order gives notice that such article or processing equipment is, or is suspected of being, in violation and has been detained or embargoed and which order warns all persons not to remove, use, or dispose of such article or processing equipment by sale or otherwise until permission for removal, use, or disposal is given by the department or the court. It is unlawful for any person to remove, use, or dispose of such detained or embargoed article or processing equipment by sale or otherwise without such permission in accordance with 500.172 (1) Florida Statutes.

AN ADMINISTRATIVE HEARING IS AVAILABLE FOR ALL ORDERS, NOTICES, AND REPORTS IN THIS SUPPLEMENTAL REPORT

If you wish to contest the Department's action, you have the right to request an administrative hearing to be conducted in accordance with Sections 120.569 and 120.57, Florida Statutes and to be represented by counsel or other qualified representative. Your request for hearing must contain:

1. Your name, address, and telephone number, and facsimile number (if any).
2. The name, address, and telephone number, and facsimile number of your attorney or qualified representative (if any) upon whom service of pleadings and other papers shall be made.
3. A statement that you are requesting an administrative hearing and dispute the material facts alleged by the department, in which case you must identify the material facts that are in dispute (formal hearing), or that you request an administrative hearing and that you do not dispute the facts alleged by the department (informal hearing).
4. A statement of when (date) you received the Notice and the file number of this Notice.

Your request for a hearing must be received at the address shown on this Notice within twenty-one (21) days of receipt of this Notice. If you fail to obtain a Release from this Notice or fail to request an administrative hearing within the twenty-one (21) day deadline you waive your right to a hearing and the Department may enter a Final Order imposing up to the maximum penalties as authorized by Florida Law.

HEARING WAIVER AND WAIVER OF RIGHTS ON DESTROYED PRODUCTS

I, ANJAN ROY the person in charge of KWIK STOP #7550 hereby waive a notice and a hearing as provided in Chapter 120, Florida Statutes and waive all rights as provided on the last page of this report.

(Signature)

ACKNOWLEDGEMENT

A copy of this report has been provided to the person in charge of the food establishment.

I acknowledge receipt of a copy of this document.

Signature of FDACS Representative

SCOTT HOUSE, SANITATION AND SAFETY SPECIALIST

Signature of Representative

ANJAN ROY, PERSON IN CHARGE

Print Name and Title