



City of Pompano Beach
 Department of Development Services
 Planning & Zoning Division

P&Z#: 25-17000008

100 W. Atlantic Blvd Pompano Beach, FL 33060
 Phone: 954.786.4679 Fax: 954.786.4666

Development Application

Project Type: Special Exceptions

Submission #: SPEX-2025-17

Site Data			
Project Name:	The Luminous Care	Size of property:	3323.0
Street Address:	2500 NE 19 St	Number of units (Residential):	
Folio Number(s):	484330140140	Total square feet of the building* (Non-Residential):	
Project Narrative:	Recovery/Transitional Residence		

Applicant			Landowner (Owner of Record)		
Name:			Business Name (if applicable):		
Vedanti Vyas			AIM PARTNERS LLC		
Title:			Print Name:		
Executive Director			AIM PARTNERS LLC		
Street Address:			Street Address:		
5902 Abbey Rd			7901 4TH ST N STE 300		
Mailing Address City/ State/ Zip:			Mailing Address City/ State/ Zip:		
Tamarac	FL	33321	ST PETESBURG	FL	33072
Phone Number:			Phone Number:		
646-874-0694			213-503-4305		
Email:			Email:		
vvyas@theluminouscare.com			an.miatselitsa@gmail.com		

ePlan agent (if different):	
Name of ePlan agent:	
Email of ePlan agent:	
Phone Number of ePlan agent:	



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Owner's Certificate
Special Exceptions

OWNER'S CERTIFICATE

SPEX-2025-17

This is to certify that:

- I am the owner of the property, or
- I am authorized by the owner of the property to submit this application on their behalf and (if I am not the owner of the property) I will submit documentation that confirms my authority.

This is to certify that I am the owner of the subject lands described in this application and that I have authorized the filing of the aforesaid application.

By signing below, I agree that if the proposed development is found not in compliance with the applicable standards and minimum requirements of this Code then no building permit will be issued until those conditions the Development Services Director finds reasonably necessary to ensure compliance are met.

By signing below, I acknowledge that development applications must have a determination by the governing municipality of approved, approved with conditions, or denied within 120 days from a complete submittal for projects that do not require final action through a quasi-judicial hearing or a public meeting and within 180 days from a complete submittal for projects that do require final action through a quasi-judicial hearing or a public meeting per FL Stat § 166.033 and the Pompano Beach Code Section 155.2303.F.3. It is the responsibility of the applicant to receive all final Development Orders and receive this determination within the allotted timeframe. If the applicant fails to resubmit an application within 30 calendar days after being first notified of deficiencies of the submittal, the application shall be considered withdrawn and a \$100 non-refundable administrative fee will apply (155.2303.F.2.b). Additionally, if all required approvals are not received within the allotted timeframe the application will automatically be denied unless both the City and the applicant agree to an extension of time (155.2303.I).

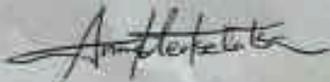
By signing below, I acknowledge that lying or misrepresentation in the application can lead to revocation. (155.8402. B. *Revocation of Approval*).

Name: Vedanti Vyas 07/17/2025

Signature: *Vedanti Vyas*

Aim Partners LLC hereby authorizes Vedanti Vyas as a representative for zoning purposes related to the property located at 2500 ne 19th st Pompano Beach FL 33062

Legal description: CONNOR ESTATES 29-38 B LOT 14 BLK 1



Anastasiya Miatselitsa,
member Aim Partners LLC

07/15/25

State of Florida - County of Broward

The foregoing document was
acknowledged before me
on this 15 day of July, 2025,

Notary 



Steven Kelly
Comm.: HH 483315
Expires: Feb. 15, 2028
Notary Public - State of Florida

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000247871

Entity Name: AIM PARTNERS LLC

Current Principal Place of Business:

7901 4TH ST N
STE 300
ST PETERSBURG, FL 33702

Current Mailing Address:

7901 4TH ST N
STE 300
ST PETERSBURG, FL 33702 US

FEI Number: 93-1470837

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUNSHINE CORPORATE FILINGS LLC
7901 4TH ST N
STE 300
ST PETESBURG, FL 33702 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name MIATSELITSA, IVAN
Address 7901 4TH ST N STE 300
City-State-Zip: SAINT PETERSBURG FL 33702

Title AMBR
Name MIATSELITSA, ANASTASIYA
Address 7901 4TH ST N STE 300
City-State-Zip: ST PETESBURG FL 33702

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANASTASIYA MIATSELITSA

MEMBER

05/01/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date