



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

P&Z#: 26-11000009

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

**Development Application**

**Project Type:** Variance

**Submission #:** VAR-2026-13

Site Data			
Project Name:	none has been selected	Size of property:	7494.0
Street Address:	3415 Dover Road	Number of units (Residential):	1.0
Folio Number(s):	484329040920	Total square feet of the building* (Non-Residential):	3305.0
Project Narrative:	Attached pergola encroachment + deficient front yard pervious area		

Applicant	Landowner (Owner of Record)
Name:	Business Name (if applicable):
	Executive Property Relations, LLC
Title:	Print Name:
	Nilo Ventura Jr
Street Address:	Street Address:
	2087 W 76th St
Mailing Address City/ State/ Zip:	Mailing Address City/ State/ Zip:
	Hialeah FL 33016
Phone Number:	Phone Number:
	786-236-5080
Email:	Email:

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



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**Owner's Certificate  
Variance**

**OWNER'S CERTIFICATE**

VAR-2026-13

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: Nilo Ventura Jr 03/10/2026

Signature: *Nilo Ventura Jr*



City of Pompano Beach  
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100 W. Atlantic Blvd Pompano Beach, FL 33060  
 Phone: 954.786.4634 Fax: 954.786.4666

**Zoning Board of Appeals Application**

Special Exception	Variance	Major Temporary Use	Interim Use Permit
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3415 Dover Road		4843 29 040920	RS-2
STREET ADDRESS		Folio Number	Zoning District
Hillsboro Shores		7	5
Subdivision		Block	Lot
Representative or Agent's interest in property (Owner, Lessee, Etc)	Owner		
Has any previous application(s) been filed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Appeal # or Date _____		
Request			

Owner's Representative or Agent	Landowner (Owner of Record)
	Executive Property Relations, LLC
Business Name (if applicable)	Business Name (if applicable)
	Nilo Ventura Jr / Manager
Print Name and Title	Print Name and Title
Signature	Signature
	3/9/2026
Date	Date
	2087 W 76th Street
Street Address	Street Address
	Hialeah, FL, 33014
Mailing Address City/ State/ Zip	Mailing Address City/ State/ Zip
	786-236-5080
Phone Number	Phone Number
Email	Email <input checked="" type="checkbox"/>

### Zoning Board of Appeals Application

#### OWNER'S CERTIFICATE


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. I further certify that this request is not related to any existing violation of the zoning code.

Note: If this request is related to an existing zoning violation, please submit documentation as to the Special Master's disposition of the matter.

**Owner's Name:** Executive Property Relations, LLC  
(Print or Type)  
**Address:** 2087 W 76<sup>th</sup> Street  
Hialeah, FL 33014  
(Zip Code)  
**Phone:** 786-236-5080

**Email address:** \_\_\_\_\_  
[Signature]  
(Signature of Owner or Authorized Official)

**SWORN AND SUBSCRIBED** before me this 9 day of March, 2026

[Signature]  
**NOTARY PUBLIC, STATE OF FLORIDA**  
(Name of Notary Public: Print, stamp, or Type as Commissioner)  
 **YUNIE JIMENEZ**  
Notary Public  
State of Florida  
Commission # 111560669  
Expires 7/30/2029

Personally know to me, or  
 Produced identification: \_\_\_\_\_  
(Type of Identification Produced)

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000166295

**Entity Name:** EXECUTIVE PROPERTY RELATIONS LLC

**Current Principal Place of Business:**

2087 WEST 76TH ST  
HIALEAH, FL 33016

**Current Mailing Address:**

2087 WEST 76TH STREET  
HIALEAH, FL 33016 US

**FEI Number:** 47-2180454

**Name and Address of Current Registered Agent:**

PETER M. LOPEZ, P.A.  
1911 NW 150 AVENUE  
SUITE 201  
PEMBROKE PINES, FL 33028 US

**FILED**  
**Mar 24, 2025**  
**Secretary of State**  
**6370980486CC**

**Certificate of Status Desired:** No

*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:** PETER M LOPEZ

03/24/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MANAGER
Name	VENTURA, LUCY	Name	VENTURA JR, NILO
Address	7600 W. 20 AVENUE #111	Address	7600 W. 20 AVENUE SUITE 111
City-State-Zip:	HIALEAH FL 33016	City-State-Zip:	HIALEAH FL 33016

*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:** VENTURA JR. , NILO

MANAGER

03/24/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date