



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

P&Z#: 23-17000005

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

**Development Application**

**Project Type:** Special Exceptions

**Submission #:** SPEX-2023-7

Site Data			
Project Name:	Siesta By The Beach	Size of property:	7500.0
Street Address:	3225 NE 7 ST	Number of units (Residential):	8.0
Folio Number(s):	484331090220	Total square feet of the building* (Non-Residential):	
Project Narrative:	Conduct business as a motel/hotel with 8 rooms.		

Applicant		Landowner (Owner of Record)	
Name:	Reef Vacation Management	Business Name (if applicable):	3225 NE 7 ST LLC
Title:	Attn: Or "Ray" Hen	Print Name:	Attn: Lior Raviv
Street Address:	420 S Dixie Hwy	Street Address:	420 S Dixie Hwy, 2nd Floor
Mailing Address City/ State/ Zip:	Hallandale Beach FL 33009	Mailing Address City/ State/ Zip:	Hallandale Beach FL 33009
Phone Number:	305-912-9780	Phone Number:	781-267-3416
Email:	reefvacationapt@gmail.com	Email:	reefvacationapt@gmail.com

ePlan agent (if different):	
Name of ePlan agent:	Ginet Hernandez
Email of ePlan agent:	consultinggroupbmc@gmail.com
Phone Number of ePlan agent:	786-300-7841



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**Owner's Certificate**  
**Special Exceptions**

**OWNER'S CERTIFICATE**

SPEX-2023-7

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: Lior Raviv 06/28/2023

Signature: Lior Raviv

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000150867

**Entity Name:** 3225 NE 7 ST LLC

**Current Principal Place of Business:**

420 S DIXIE HWY  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

420 S DIXIE HWY.  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** 86-2972622

**Certificate of Status Desired:** No

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

**RAVIV, LIOR**  
420 S DIXIE HWY.  
HALLANDALE BEACH, FL 33009 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:** **LIOR RAVIV**

01/20/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name RAVIV, LIOR  
Address 13200 BISCAYNE BAY TER  
City-State-Zip: NORTH MIAMI FL 33181

Title MGR  
Name AZULAY, ARIK  
Address 19501 NE 22ND AVENUE  
City-State-Zip: MIAMI FL 33180

Title MGR  
Name YNSTORES LLC  
Address 418 S. DIXIE HWY.  
City-State-Zip: HALLANDALE BEACH FL 33009

*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:** LIOR RAVIV

MGR

01/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date