



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

Development Application

Project Type: Variance

Submission #: VAR-2026-9

Site Data			
Project Name:	2314 E Atlantic medical office	Size of property:	1.0
Street Address:	2314 E Atlantic Blvd	Number of units (Residential):	0.0
Folio Number(s):	4842 36 01 2300	Total square feet of the building* (Non-Residential):	0.0
Project Narrative:	renovation of building to medical office.		

Applicant			Landowner (Owner of Record)		
Name:			Business Name (if applicable):		
herbert frogner					
Title:			Print Name:		
Agent			Strength in Him LLC		
Street Address:			Street Address:		
3402			2314 E Atlantic Blvd		
Mailing Address City/ State/ Zip:			Mailing Address City/ State/ Zip:		
Stuart	FL	34997	Pompano Beach	Florida	33062
Phone Number:			Phone Number:		
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**

VAR-2026-9

OWNER'S CERTIFICATE

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: Jim Frogner 02/19/2026

Signature: 

STRENGTH IN HIM LLC
305 N Pompano Beach Blvd. #409
Pompano Beach, FL 33069

February 14, 2026

City of Pompano Beach
Department of Development Services
Planning and Zoning Division
100 East Atlantic Blvd
Pompano Beach, FL 33060

RE: Owner Authorization

I am the Manager of the property located at 2314 E. Atlantic Blvd. in the City of Pompano Beach, Florida. Mr. Jim Frogner and Frogner Consulting, LLC have my permission to represent my company before city agencies during the Board of Adjustment process on our property for a reduction in parking.

If you have any questions, please contact me.

Sincerely,

Laura Uchoa, APRN.

LU/en



Cc: Frogner Consulting

NOTARY PUBLIC INFORMATION: STATE OF FLORIDA COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me by means of physical presence or [] online notarization, this 16 day of February, 2026 by Laura Uchoa (name of person acknowledging). He she is personally known to me or has produced FL DL (type of identification) as identification and did did not take an oath (circle correct response).

Aline Barbosa Cilento
(Name - type, stamp or print clearly)

Aline Cilento
(Signature)

My Commission Expires on: NOTARY'S SEAL OR STAMP



ALINE BARBOSA CILENTO
Notary Public
State of Florida
Comm# HH479603
Expires 1/10/2028



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Limited Liability Company
STRENGTH IN HIM LLC

Filing Information

Document Number	L25000253202
FEI/EIN Number	NONE
Date Filed	05/29/2025
Effective Date	05/29/2025
State	FL
Status	ACTIVE

Principal Address

305 N POMPANO BEACH BLVD
APT 409
POMPANO BEACH, FL 33062

Mailing Address

305 N POMPANO BEACH BLVD
APT 409
POMPANO BEACH, FL 33062

Registered Agent Name & Address

PRIME INCOME TAX AND ACCOUNTING LLC
23269 STATE ROAD 7
SUITE 119
BOCA RATON, FL 33428

Authorized Person(s) Detail

Name & Address

Title MGR

UCHOA, LAURA
305 N POMPANO BEACH BLVD APT 409
POMPANO BEACH, FL 33062

Title MGR

VASQUEZ, CECILIA
15725 SW 102ND PL
MIAMI, FL 33157