

COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA

OBTS #	REPORT # T120-6376		DOCKET # 1835361	
Person ID	311507089		SSN# [REDACTED]	
Charge Description	<input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> Warrant <input type="checkbox"/> Traffic <input type="checkbox"/> Ordinance		Traffic Citation # (if any)	
Charge	BATTERY; DOMESTIC		Court Case # 20-04597-MM-1	
Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht
MOORE, ARIANNA GABRIEL	07/12/1991	F	W	506
Wt	Hair	Eyes	Skin	
120	BLK	BRO	OLV	
Alias	DL #	State	Scars/Marks/Tattoos/Physical Features	
	M-600-007-91-752-0	FL		
Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship	
3821 BEECHWOOD BLVD TAMPA FL 33619	813-469-6185	FL	USA	
Permanent Address (Street, City, State, Zip Code)	Telephone	Employed by / School		
1828 UPPER ROAD WESLEY CHAPEL FL 33543	813-469-6185			
Weapon Seized Type	Indication of Drug Influence	Indication of Mental Health Issues	Indication of Alcohol Influence	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> UNK	
Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 11 day of APRIL, 2020,

at approximately 10:20 PM, at 11955 3RD ST E APT. 3, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE RAYMOND VEDROS HER BOYFRIEND AND CO-HABITANT, AGAINST THE WILL OF RAYMOND VEDROS TO-WIT: SLAPPED THE VIC TWICE IN THE HEAD.

WITNESS STATED THE DEF STRUCK THE VICTIM IN THE FACE MULTIPLE TIMES IN HER BACKYARD. WITNESS WAS ALSO VIC OF A SEPARATE DOMESTIC BATTERY BY THE DEF. VIC LEFT THE SCENE AND OVER THE PHONE ADVISED TO OFFICER THE DEF SLAPPED HIM OPEN HANDED TWICE IN THE HEAD DURING A VERBAL ARGUMENT ABOUT THE DEF DRINKING. THE DEF AND VIC ARE IN A DATING RELATIONSHIP AND HAVE RESIDED TOGETHER FOR THE PAST THREE YEARS. THE VIC DENIED ANY INJURIES. THE DEF HAS NO PREVIOUS BATTERY CONVICTIONS.

Contrary to Florida Statute/Ordinance 784.03

ARREST DATE: 4/11/2020 Time 11:32 PM . Aggravating/Mitigating Factors

Booking Officer: GUGLIOTTA, A 54151 Amount of Bond NO BOND Bond Out Date Time  a.m.  p.m.

Victim Notified of Advisory?  Yes  No Injuries to Victim?  Yes  No Medical Treatment to Victim?  Yes  No

The Court reviewed this complaint and finds there:  is probable cause  is not probable cause to detain defendant  Bond Action, if any: *Supervised Prob. no alcohol*

The probable cause determination is passed for:  24 Hrs  24 Hrs on showing of extraordinary circumstances Received by Booking: 4/12/2020 2:32:39 AM

Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.

*[Signature]*

TREASURE ISLAND POLICE Agency

Declarant Signature

OFFICER JONATHAN VANGELI T1236

311211682

Printed Name

Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS; F.S. 938.27(1)

DATE	OFFICER	HOURS X PAY RATE	OR	COST
04/11/2020	J.VANGELI	2 25.00		\$50.00
04/11/2020	L.STYLES	1 25.00		25
04/11/2020	C.BIERLY	1 25.00		25

OTHER - Describe

Continuation sheet  Yes  No TOTAL \$ \$100.00

**Defendant** MOORE, ARIANNA GABRIEL

**Court Case No:** 20-04597-MM-1

**ADVISORY AND SOLVENCY HEARING**

The above named Defendant came before me for Advisory and Solvency hearing and was advised by me of the charge(s) against him; his right to remain silent; that any statements by him may be used against him; his right to counsel, and, if he is financially unable to afford counsel, that counsel forthwith will be appointed; of his right to communicate with his counsel, family or friends, and that reasonable implementation will be afforded him to contact the foregoing.

I FURTHER CERTIFY THAT:

- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D. The Defendant waived the right to counsel at the first appearance only.

4/12/2020

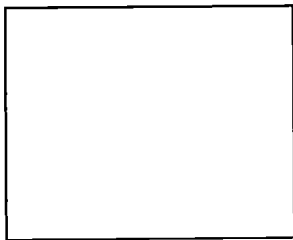
DATE AND TIME

Paul B. Brubaker

Paul B. Brubaker

JUDGE

- I hereby waive the right to counsel at the first appearance only.
- I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files an appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.



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DEFENDANT'S SIGNATURE

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

DEFENDANT'S SIGNATURE

DEFENDANT'S ATTORNEY'S SIGNATURE

DATE

COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA

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Charge	BATTERY; DOMESTIC		Traffic Citation # (if any)	Court Case #
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MOORE, ARIANNA GABRIEL	07/12/1991	F	W	506
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Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 11 day of APRIL, 2020, at approximately 10:25 PM, at 11955 3RD ST E APT. 3, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE ZOREENA DANIELLE MOORE, HER SISTER AGAINST THE WILL OF ZOREENA DANIELLE MORRE, TO-WIT: SQUEEZED INSIDE OF VICTIMS CHEEK DRAWING BLOOD.

DURING A VERBAL ALTERCATION IN THE DOORWAY OF THE VICTIMS APARTMENT, THE DEF GRABBED THE VICTIMS MOUTH WITH HER RIGHT HAND. THE DEF SQUEEZED THE RIGHT SIDE OF THE VICTIMS MOUTH WITH HER FINGERS DRAWING BLOOD. THE VICTIMS BOYFRIEND PULLED HER OFF AND THE DEF WENT INSIDE THE APARTMENT AND BEGAN THROWING MISCELLANEOUS ITEMS AROUND THE LIVING ROOM. THE DEF AND VIC ARE BIOLOGICAL SISTERS AND DO NOT RESIDE TOGETHER. THE VIC WAS TREATED ON SCENE BY FD. THE DEF WAS UNCOOPERATIVE AND INTOXICATED. THE DEF HAS NO PRIOR BATTERY CONVICTIONS.

Contrary to Florida Statute/Ordinance 784.03.

ARREST DATE: 4/11/2020 Time 11:32 PM. Aggravating/Mitigating Factors \_\_\_\_\_

Booking Officer: GUGLIOTTA, A 54151 Amount of Bond NO BOND Bond Out Date \_\_\_\_\_ Time \_\_\_\_\_  a.m.  p.m.

Victim Notified of Advisory?  Yes  No Injuries to Victim?  Yes  No Medical Treatment to Victim?  Yes  No

The Court reviewed this complaint and finds there:  is probable cause  is not probable cause to detain defendant  Bond Action, if any: Supervised Prob no alcohol  
 The probable cause determination is passed for:  24 Hrs  24 Hrs on showing of extraordinary circumstances Received by Booking: 4/12/2020 2:32:23 AM

Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.

[Signature]  
 Declarant Signature \_\_\_\_\_  
 OFFICER JONATHAN VANGELI T1236  
 Printed Name \_\_\_\_\_

TREASURE ISLAND POLICE  
 Agency \_\_\_\_\_  
 311211682  
 Declarant ID# \_\_\_\_\_

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)				
DATE	OFFICER	HOURS X PAY-RATE	OR	COST
04/11/2020	J.VANGELI	2 25.00		\$50.00
04/11/2020	L.STYLES	2 25.00		25
04/11/2020	C.BIERLY	1 25.00		25
OTHER - Describe _____				
Continuation sheet <input type="checkbox"/> Yes <input type="checkbox"/> No				TOTAL \$ 100.00

**Defendant** MOORE, ARIANNA GABRIEL

**Court Case No:** 20-04597-MM-2

**ADVISORY AND SOLVENCY HEARING**

The above named Defendant came before me for Advisory and Solvency hearing and was advised by me of the charge(s) against him; his right to remain silent; that any statements by him may be used against him; his right to counsel, and, if he is financially unable to afford counsel, that counsel forthwith will be appointed; of his right to communicate with his counsel, family or friends, and that reasonable implementation will be afforded him to contact the foregoing.

I FURTHER CERTIFY THAT:

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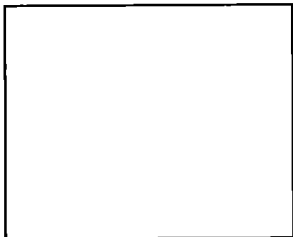
4/12/2020

DATE AND TIME

Paul B. Brube

JUDGE

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I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

DEFENDANT'S SIGNATURE

DEFENDANT'S ATTORNEY'S SIGNATURE

DATE