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PH 726

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-21084299									
Charge Type: Check as many as apply.		1. Felony <input type="checkbox"/> 2. Traffic Felony		3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 0 1. Yes 2		Multiple Clearance Indicator 01			
Location of Arrest (Including Name of Business) 2845 N Military Trail West Palm Beach FL, 33409						Location of Offense (Business Name, Address) 2845 N Military Trail West Palm Beach FL, 33409							
Date of Arrest 07/10/2021		Time of Arrest 0151		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle N/A	
Name (Last, First, Middle) Mirabal, Freyman												Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White - American Indian		Sex M		Date of Birth 06/17/1972		Height 5'11		Weight 220		Eye Color Brown		Hair Color Black	
Complexion Large		Build Large		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None		Marital Status Married		Religion None		Indication of Alcohol Influence Y		Indication of Drug Influence Y	
Local Address (Street, Apt. Number) 4398 Calamondin Blvd		(City) Loxahatchee		(State) FL		(Zip) 33470		Phone (561) 5234492		Residence Type: 1. City 2. County 3. Florida 4. Out of State		2	
Permanent Address (Street, Apt. Number) 4398 Calamondin Blvd		(City) Loxahatchee		(State) FL		(Zip) 33470		Phone ()		Address Source Florida DL			
Business Address (Name, Street) ()		(City) ()		(State) ()		(Zip) ()		Phone ()		Occupation ()			
DL Number, State M614240722170		Soc. Sec. Number ()		INS Number ()		Place of Birth (City, State) Matanzas, Cuba		Citizenship US					
Co-Defendant Name (Last, First, Middle) ()		Race ()		Sex ()		Date of Birth ()		1. Arrested 2. At Large		3. Felony 4. Misdemeanor 5. Juvenile			
Co-Defendant Name (Last, First, Middle) ()		Race ()		Sex ()		Date of Birth ()		1. Arrested 2. At Large		3. Felony 4. Misdemeanor 5. Juvenile			
Parent Legal Custodian ()		Name (Last) ()		(First) ()		(Middle) ()		Residence Phone ()		Business Phone ()			
Address (Street, Apt. Number) ()		(City) ()		(State) ()		(Zip) ()							
Notified by: (Name) ()		Date ()		Time ()		Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated							
Released To: (Name) ()		Relationship ()		Date ()		Time ()							
The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 366-2628) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason) ()		School Attended ()		Grade ()									
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property ()		Value of Property ()									
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine	
B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown							
Charge Description Trespassing after Warning		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 810.09(2b)		Violation of ORD # ()					
Drug Activity N		Drug Type N		Amount / Unit ()		Offense # 21084299		Warrant / Capias Number ()		Bond ()			
Charge Description ()		Counts ()		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number ()		Violation of ORD # ()					
Drug Activity ()		Drug Type ()		Amount / Unit ()		Offense # ()		Warrant / Capias Number ()		Bond ()			
Charge Description ()		Counts ()		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number ()		Violation of ORD # ()					
Drug Activity ()		Drug Type ()		Amount / Unit ()		Offense # ()		Warrant / Capias Number ()		Bond ()			
Charge Description ()		Counts ()		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number ()		Violation of ORD # ()					
Drug Activity ()		Drug Type ()		Amount / Unit ()		Offense # ()		Warrant / Capias Number ()		Bond ()			
Location (Court Room Number, Address) 2845 N Military Trail West Palm Beach FL 33409		Court Date and Time Month July Day 27 Year 2021 Time 0630 (AM) (PM)		I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE CHARGE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		07/10/2021		Signature of Defendant (or Juvenile and Parent / Custodian) ()		Date Signed ()			
HOLD for other Agency Name: ()		Signature of Arresting Officer ()		Name Verification (Printed by Arrestee) ()		(PRINT) ()		PAGE 1		OF 1			
Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Other: ()		Resisted Arrest <input type="checkbox"/> Other: ()		Name of Arresting Officer (Print) D/S Mendez		I.D. # 27513		Transporting Officer D/S Mendez		I.D. # 27513		Agency PBSO	
Intake Deputy ()		I.D. # ()		Pouch # ()		Witness here if subject signed with an "X" ()							

JUL 10 2021

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile <input type="checkbox"/>	
ADMIN	OBTS Number			Agency ORI Number		Agency Name		Agency Report Number	
				FLO 500000		PALM BEACH COUNTY SHERIFF'S OFFICE		06- 21084299	
CHARGES	Charge Type:	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:	
	Name (Last, First, Middle)	Mirabal, Freyman		Alias		Race		Sex	Date of Birth
VICTIM	Charge Description	Trespassing after Warning		810.09(2b)		Charge Description			
	Charge Description					Charge Description			
VICTIM	Victim's Name (Last, First, Middle)	La Fonda		Race		Sex		Date of Birth	
	Local Address (Street, Apt. Number)	(City)	(State)	(zip)	Phone		Address Source		
	Business Address (Name, Street)	(City)	(State)	(zip)	Phone		Occupation		
		2845 N Military Trail		West Palm Beach		FL, 33409		(561) 8416055	
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.									
On the <u>10th</u> day of <u>July</u> 20 <u>21</u> at <u>0150</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)									
On July 10th 2021 I was on routine patrol in the area of 2845 N Military Trail West Palm Beach FL, 33409.									
While I was located at 2845 N Military Trail West Palm Beach FL, 33409, a security guard named Kent Brawner who was working for the business La Fonda waved me down. Kent approached me and advised me he wanted a male to leave the business due to him starting arguments with people and attempting to pick fights. I called the male towards me and the male was later identified as Freyman Mirabal.									
I advised Freyman that he has to leave the area due to security asking him to leave. Freyman did not leave and kept saying how he was not going to leave. I told Kent that Freyman was not leaving and at that time Kent verbally told Freyman that he was officially trespassed. I advised Freyman that since he was trespassed he had to leave and could not come back for a full year, if he does come back, he would be arrested. Freyman still refused to leave the business. I told Freyman that he has to leave or he would be arrested. Freyman said he did not care and was not leaving. I told Freyman three more times to leave and he still refused to cooperate and did not leave.									
I grabbed Freyman's left wrist and Deputy Rojas #36816 grabbed his Right wrist. Deputy Rojas placed hand restraints on Freyman's wrist, I checked for proper fit, and double locked them.									
Due to Freyman being told multiple times to leave, given time to leave, and still not leaving. I find probable cause to arrest Freyman for Trespassing after warning F.S.S. #810.09(2B)									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		7750 (Signature of Arresting/Investigative Officer)		D/S Mendez				
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>10th</u> day of <u>JULY</u> 20 <u>21</u> by <u>D/S Mendez</u>								
	(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN LEO</u>								
	Notary Public, Clerk of Court, Officer (F.S.S. 111.19)								



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021016997

Date: 7/9/21

Specialist Name/ID: A. Pinkney/7796

SEARCHED
JUL 10 2021