

21CF 5564 mB

ADMINISTRATIVE	OBTS Number		Arrest / Notice to Appear Juvenile Referral Report				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		Juvenile <input type="checkbox"/>		
	Agency ORI Number FLO 502700		Agency Name PALM SPRINGS POLICE DEPARTMENT				Agency Report Number 82-2021-017219				
	Charge Type: Check as many as apply.		<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type N/A		
	Location of Arrest (Including Business Name) 230 Cypress Ln Palm Springs FL 33461		Location of Offense (Business Name, Address) 230 Cypress Ln Palm Springs FL 33461				Date of Arrest 7/23/2021		Time of Arrest 0145		
DEFENDANT	Name (Last, First, Middle) Breykin, Maya P.		Alias								
	Race: W - White I - American Indian B - Black O - Oriental/Asian		<input checked="" type="checkbox"/> W		Sex F		Date of Birth 05/27/1981		Height 5'9"		
	Weight 135		Eye Color Bro		Hair Color Blond		Complexion Light		Build small		
	Scars, Marks, Tattoos, Unique Physical features (Location, Type, Description)				Marital Status		Religion		Indication Of		
	Local Address (Street, Apt, Number) (City) (State) (Zip) 1018 Water Tower Way, Lantana Beach FL 33462				Phone		Residence Type: 1 City 3 Florida 2 County 4 Out of State 4				
	Permanent Address (Street, Apt, Number) (City) (State) (Zip) 1018 Water Tower Way, Lantana Beach FL 33462				Phone		Address Source Defendant				
	Business Address (Street, Apt, Number) (City) (State) (Zip)				Phone		Occupation				
	D/I Number, State B-625-555-81-687-0/FL				INS Number		Place of Birth (City, State) Russia		Citizenship No.		
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor		
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor		
JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Other Name (Last, First, Middle)		Residence Phone								
	<input type="checkbox"/> Legal Custodian		Business Phone								
	Local Address (Street, Apt, Number) (City) (State) (Zip)										
	Notified by: (Name)		Date		Time		Juvenile Disposition: 1. Handled/Processed within 2. TOT HRS/DYS 3. Incarcerated 3				
	Released To: (Name)		Relationship		Date		Time				
	The above address was 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's Office (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes by: (name) <input type="checkbox"/> No:								School Attended		Grade
CODE	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property				
	Drug Activity S. Sell R. Smuggle K. Dispense/ M. Manufacture Z. Other N. N/A B. Buy D. Deliver Distribute Produce/ Cultivate		Drug Type N. N/A B. Barbiturate H. Hallucinogen P. Paraphernalia/ U. Unknown C. Cocaine M. Marijuana Equipment Z. Other A. Amphetamine E. Heroin O. Opium/Deriv S. Synthetic								
CHARGE	Charge Description Battery on LEO		Counts 4		Domestic Violence No		Statute Violation Number 784.07(2b)		Violation of ORD #		
	Drug Activity N Drug Type N Amount / Unit		Offense Number 2021-017219		Warrant / Capias Number		Bond				
CHARGE	Charge Description Disorderly Intoxication		Counts 1		Domestic Violence No		Statute Violation Number 856.011		Violation of ORD #		
	Drug Activity N Drug Type N Amount / Unit		Offense Number 2021-017219		Warrant / Capias Number		Bond				
CHARGE	Charge Description Child Neglect		Counts 1		Domestic Violence No		Statute Violation Number 827.03(2)(a) (21) PAB		Violation of ORD #		
	Drug Activity N Drug Type N Amount / Unit		Offense Number 2021-017219		Warrant / Capias Number		Bond				
CHARGE	Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #		
	Drug Activity Drug Type Amount / Unit		Offense Number		Warrant / Capias Number		Bond				
NOTICE TO	<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address) CJC - 3228 Gun Club Rd. WPB, FL 33406								
	<input type="checkbox"/> Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse side.		Court Date and Time Month: Day: Year: Time:								
ADMIN.	Signature of Defendant (or Juvenile and Parent / Custodian)		Signature of Arresting Officer								
	HOLD for other agency Name:		Name of arresting Officer (Print) ofc. Dejesus		I.D.# 178		Name Verification (Printed by Addressee) (PRINT)		Page 1 of 1		
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Intake Deputy ofc. HONOP/1700		Pouch #		Transporting Officer ofc. Dejesus		I.D.# 178		
	Witness here if subject signed with X										

J# 0524343

PA 1132

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		Juvenile <input type="checkbox"/>
ADMIN.	Agency ORI Number FLO 502700		Agency Name <b>PALM SPRINGS POLICE DEPARTMENT</b>		Agency Report Number 82- 2021-017219	
	Charge Type: Check as many as apply.	<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other			Special Notes:	
DEF.	Name (Last, First, Middle) Breykin, Maya P.			Alias	Race	Sex    Date of Birth 05/27/1981
	Charge Description Battery on LEO			Charge Description Disorderly Intoxication		
CHARGES	Charge Description Child Neglect			Charge Description		
	Victim's Name (Last, First, Middle)			Alias	Race	Sex    Date of Birth
VICTIM	Local Address (Street, Apt, Number)    (City)    (State)    (Zip)			Phone		Address Source Defendant
	Business Address (Street, Apt, Number)    (City)    (State)    (Zip)			Phone		Occupation

The undersigned certifies and swears that he/she has just and reasonable grounds, and does believe the above named Defendant committed the following violation of law. The person taken into custody....

☒ Committed the below acts in my presence.      ☒ was observed by myself who told that he/she saw the arrested person commit the acts below.

☐ Confessed to admitting to the below acts.      ☒ was found to have committed the below acts, resulting from my (described)

On the 03 day of July 2021 at 0145 ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)

(PROBABLE CAUSE STATEMENT)

On 7/3/2021 at 0000 hrs, we responded to a Welfare check incident at 1771 S. Congress Ave Palm Springs, FL 33461 (Wawa North). Dispatch advised that there was [REDACTED] that did appear to be ok, with a child. Upon arrival, we did not find anyone matching that description.


While searching the nearby area we saw a w/f sitting on the sidewalk and a child asleep on the floor with a blanket over her across the street from Wawa North on 1800 S. Congress Ave Palm Springs, FL 33461. I made contact with the w/f and child, later identified as Maya P. Breykin [REDACTED]. M. Breykin stated she was in a domestic incident with her boyfriend at their home [REDACTED].

While speaking with M. Breykin, I could smell a strong odor of an unknown alcoholic beverage emanating from her breath. I observed M. Breykin had blood shot eyes, had a hard time concentrating and had very delayed responses to questions being asked at times closing her eyes for an extended periods of time. I observed M. Breykin behave in a very erratic manner by rapidly switching from being upset and crying, to screaming, to speaking normally. I also observed that while speaking with M. Breykin, she was not able to properly attend [REDACTED] as I had to prevent the child from crossing the S. Congress Ave, a major roadway, on multiple occasions.

Lantana PD was contacted and a unit was sent over to the home. They advised no one was home, but there was a broken TV in front of the apartment. Lantana PD also advised that neighbors reported a history of domestic incidents at that residence in the past, but police were never called.

Due to the above information DCF was then contacted to help provide resources. M. Breykin agreed to come to the station with [REDACTED] and wait for DCF to arrive. Both [REDACTED] were placed in my marked patrol unit #192 along with their belongings and transported to Palm Springs Police Department located at 230 Cypress Ln, Palm Springs, FL 33461.

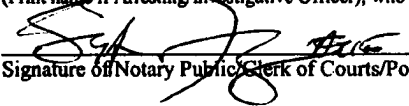
STATE OF FLORIDA  
COUNTY OF PALM BEACH



Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 03 day July 2021 by Ofc. De Jesus

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: personally known to me



Signature of Notary Public/Clerk of Courts/Police Officer

**PROBABLE CAUSE CONTINUATION**

Defendant:  
Breykin, Maya P.

Agency Report Number: 82-2021-017219

Upon arrival at Palm Springs Police Department, I attempted to escort M. Breykin and [REDACTED] inside the station when she became verbally abusive and continued to ask why she was at the station and why was she being arrested. She was explained once more that she was not under arrest and that we were only waiting for DCF to arrive and speak to her.

M. Breykin's behavior continued to escalate, she grabbed her belongings and began to walk away at which point she was informed she was not allowed to leave, she was lawfully detained. She continued to walk away and was informed that if she continued to be uncooperative that she would be arrested. I placed myself in front of M. Breykin to prevent her from walking away at which point she continued to come in my direction while cursing and threatening the officers.

Lt. Vazquez and I attempted to put her in handcuffs when she began to actively resist us, stiffening up and charging at us in an aggressive threatening manner. Additional help was requested and Sgt. Fequiere and Ofc. Quintero arrived for assistance. M. Breykin then began to kick violently, at which point Sgt. Fequiere was kicked as he attempted to remove the child from the proximity. M. Breykin continued to kick striking Lt. Vazquez, Sgt. Fequiere, Ofc. Quintero and I on multiple occasions before finally being handcuffed. The handcuffed was checked for tightness and double locked for safety. After being handcuffed M. Breykin attempted to bite officers on scene while being escorted to the holding cell.

While inside the holding cell, M. Breykin's continued to be violent standing on the sitting area, kicking the glass, spitting and screaming the entire time. On multiple occasions, I attempted to speak to M. Breykin to attempt and remove the handcuffs but she continued to behave in an uncooperative and aggressive manner.

DCF investigator Maida Wallsh arrived and attempted to speak to M. Breykin while inside the holding cell but M. Breykin continued to behave in an aggressive and uncooperative manner. During this time M. Breykin complained of pain in her hands and that she was bleeding from her handcuffs. I personally inspected her handcuffs for tightness and was able to place my fingers inside her handcuffs. I did not observe any blood coming from her hands. PBCFR was called, they arrived and checked M. Breykin and found her to be okay as well.

Based on the above information M. Breykin is being charged with four counts of Battery on a LEO F.S.S. 784.07(2b), one count of Child Neglect F.S.S. 827.03(2d) and Disorderly Intoxication F.S.S. 856.011. M. Breykin, was then transported to Palm Beach County Jail for processing.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Signature of Arresting/Investigating Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 03 day July 2021 by Ofc. De Jesus

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: personally known to me

Signature of Notary Public/Clerk of Courts/Police Officer



**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)
<b>L/E Exemptions</b>	<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.	
<b>Public Info. Exemptions</b>	<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.	
<b>Florida Rules of Judicial Administration 2.420 (Rule of 23)</b>	<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"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
<b>Other</b>	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

**REVIEW COMPLETED BY**

**Booking Number:** 2021016278

**Date:** 7/4/2021

**Specialist Name/ID:** T Howard/7185