

2020CF2157

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias 3 Juvenile N

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-20033662	
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 1. Yes 2. No
Location of Arrest (Including Name of Business)			Location of Offense (Business Name, Address)			
Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) Rondon, Stephanie, M						Alias (Name, DOB, Soc. Sec. #, Etc.)		
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W F	Date of Birth 12/28/1981	Height 5'5"	Weight 120	Eye Color Blue	Hair Color Brown	Complexion MED	Build THIN
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOOS ALL OVER				Marital Status Single	Religion NONE	Indication of: Alcohol Influence Y N Unk. Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Local Address (Street, Apt. Number) 5517 Thurston Ave, Lake Worth, FL 33463			(City)	(State)	(Zip)	Phone ()	Residence Type: 1. City 3. Florida 2. County 4. Out of State	
Permanent Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone ()	Address Source FL DL	
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone ()	Occupation ENTERTAINER	
D/L Number, State		Soc. Sec. Number		INS Number		Place of Birth (City, State) NEW YORK NEW YORK		Citizenship US

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:	Address (Street, Apt. Number)				(City)	(State)	(Zip)	Residence Phone ()
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 355-2526) 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 Z. Other
Charge Description Child abuse			Counts 01	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 827.03(2)(c)		Violation of ORD #			
Drug Activity N	Drug Type N	Amount / Unit	Offense # 20033662	Warrant / Capias Number		Bond				
Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input 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 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 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)					
Court Date and Time					
Month	Day	Year	Time	AM	PM
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE 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					
Signature of Defendant (or Juvenile and Parent /Custodian)				Date Signed	

HOLD for other Agency Name:		Signature of Arresting Officer X		Name Verification (Printed by Arrestee)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		(PRINT)	
Intake Deputy		I.D. #	Pouch #	Name of Arresting Officer (Print) DS E. CANO	
Transporting Officer		I.D. #	Agency	I.D. # 29817	
Witness here if subject signed with an -X"				PAGE 1 OF 1	

PROBABLE CAUSE AFFIDAVIT

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias

3 Juvenile N

Agency ORI Number: FLO 500000 Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number: 06-20033662

Charge Type: 1. Felony (checked), 2. Traffic Felony, 3. Misdemeanor, 4. Traffic Misdemeanor, 5. Ordinance, 6. Other

Name (Last, First, Middle): Rondon, Stephanie, M Race: W Sex: F Date of Birth: 12/28/1981

Charge Description: Child abuse 827.03(2)(c)

Local Address (Street, Apt. Number), Business Address (Name, Street), City, State, Zip, Phone, Race, Sex, Date of Birth, Address Source, Occupation

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.

On the 3RD day of February 2020 at 1210 P.M. (Specifically include facts constituting cause for arrest.) On February, 3 2020 at approximately 1210 hours responded to Teddy Bear Daycare located at 4519 Forest Ln in unincorporated Lake Worth within Palm Beach County, Florida 33463 in reference to a DCF (Department Of Children and Family) initial interview.

Upon arrival, I met with DCF worker Jillian John ID #JJ10225 who provided me with the intake paper work of the allegations for this incident. It should be noted the allegations were provided to DCF by the child's father.

The allegations stated on 02/02/2020, Stephanie Rondon, grabbed [redacted] by the hair and slammed him on the floor. The allegations stated Stephanie also uses cocaine and it is unknown if that's the reason why she hits [redacted] in this manner.

I contacted the father via phone who stated he did lie about when the incident took place and told me the video was taken on November, 4 2019. While talking to the father I did not mention the date to him in which I believed the video was actually taken on. The father became uncooperative with me and hung up.

I observed the video which showed Stephanie violently snatching [redacted] by the hair into an elevated position, from either a chair or table in an aggressive manner towards her body. She then violently shoved him away from her and to the ground.

Based on the probable cause above Stephanie Rondon did intentionally inflict physical or mental injury upon [redacted] a child, {or} did an intentional act that could have reasonably been expected to result in physical or mental injury to [redacted] a child, contrary to Florida Statute 827.03(1)(b) and (2)(c). (3 DEG FEL) (LEVEL 6)

STATE OF FLORIDA COUNTY OF PALM BEACH DS E. CANO (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 4th day of February 2020 by DS E. CANO (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced known LEO

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)