25CF8684 AMB

ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant
6. Arrest (Warrant) 4. Request for Capias
2. N.T.A. 5. Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500200
Agency Name: Boca Raton Police Department
Agency Report Number (N.T.A.'s only): 3 | 2 | 2025-011746

Charge Type: Check as many as apply. [X] 1. Felony [ ] 2. Traffic Felony [ ] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other
If Weapon Seized: Enter Type: UNARMED
Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): 5801 TOWN BAY DR, BOCA RATON, FL 33486
Location of Offense (Business Name, Address): [redacted]

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/30/2025	03:18	10/30/2025	03:18	10/30/2025	03:18	

DEFENDANT

Name (Last, First, Middle): DEBLASIO, ANGEL LYN
Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	03/23/1980	5'02	130	BROWN	BROWN	LIGHT	Small

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):
Marital Status: M
Religion: CATHOLIC
Indication of: Alcohol Influence [ ] Yes [ ] No [X] Unk. [ ] Drug Influence [ ] Yes [ ] No [X] Unk. [ ]

Local Address (Street, Apt. Number) (City) (State) (Zip): 2920 NW 26TH AVE, BOCA RATON, FL 33434
Phone: (561) 990-6777
Residence Type: 1. City 3. Florida 2. County 4. Out of State

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 2920 NW 26TH AVE, BOCA RATON, FL 33434
Phone: (561) 990-6777
Address Source: SELF

Business Address (Name, Street) (City) (State) (Zip): NA,
Phone:
Occupation:

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
D142012806030 / FL	[redacted]		NEW YORK, NY, United	US

CO-DEF

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

JUVENILE

[ ] Parent [ ] Other: [ ] Legal Custodian
Name (Last, First, Middle):
Residence Phone:
Address (Street, Apt. Number) (City) (State) (Zip):
Business Phone:

VICTIM NOTIFICATION REQUIRED

Notified by: (Name) Date Time
JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated
Released To: (Name) Relationship Date Time

The above address was provided by [ ] defendant and/or [ ] 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.
[ ] Yes, by: [ ] No:

School Attended | Grade
Property Crime? [ ] Yes [X] No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A, P. Possess, S. Sell, B. Buy, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Disperses/ 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. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
ABUSE CHILD WITHOUT GREAT BODILY HARM	827.03(2C)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	[X] Y [ ] N		NO BOND

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			[ ] Y [ ] N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			[ ] Y [ ] N		

INTAKE

Health / Apparent Physical Condition of Defendant: GOOD
Any knowledge of the following: [ ] Mental [ ] Escape Risk [ ] Medication [ ] Deformities [ ] Injuries
Explain:

Check which applies: [ ] Released O.R. [ ] Released to Parent/Guardian [X] T.O.T. County Jail [ ] Posted Bond [ ] South County Mental Health

PROPERTY - Received By	Released By	Released To
ALMEIDA	FOWLER	PBCJ

Transported By	Date Transported	Time Transported	Other
FOWLER	10/30/2025	06:20	

NOTICE TO APPEAR

[ ] INSTRUCTION NO. 1 - Mandatory appearance in court
[X] INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444
Court Date and Time:

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

No Photo Available

FILED PBC GUN CLUB
'25 OCT 31 AM 6:09

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

ADMIN

HOLD for Other Agency
[ ] Dangerous [ ] Resisted Arrest [ ] Suicidal [ ] Other
Intake Deputy: D.S.P. Belle 1511 I.D. # Pouch #

Signature of Arresting Officer
Name of Arresting Officer (Print): MEYER, T. A. I.D. # 916
Transporting Officer: FOWLER I.D. # 764 Agency: BRPD

Name Verification (Printed by Arrestee)
(PRINT) OCT 30 AM 7:40
Witness here if subject signed with an "X".

PAGE 1 OF 1

CONFIDENTIAL VICTIM INFORMATION PER MARSY'S LAW

PROBABLE CAUSE AFFIDAVIT

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

ADMIN

OBTS Number			JUVENILE
		1	

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2025-011746

Charge Type: Check as many as apply. ☒ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
DEBLASIO, ANGEL LYN		W	F	03/23/1980

CHARGES

Charge Description	Charge Description
827.03(2C) ABUSE CHILD WITHOUT GREAT BODILY HARM	
Charge Description	Charge Description

VICTIM

[redacted]

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that 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 _____ who told _____ that he/she saw the arrested person committ the below acts.

☐ confessed to _____ admitting to the below facts.

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

On the 30 day of October, 2025 at 03:18 (Specifically include facts constituting cause for arrest.)

MVR available.

On 10/30/2025, I responded to 5801 Town Bay Dr. Boca Raton, 33486, in reference to a possible missing child.

Once I located the [redacted] inside the apartment, I spoke with him in reference to why he left his house, [redacted] told me that on 10/29/2025 he left the house following a verbal altercation that turned physical involving [redacted] Angel DeBlasio and [redacted] further explained [redacted] were upset following an argument about his medication, [redacted] then asked about why he had to go to the new school he was enrolled in and started a verbal altercation with [redacted]. He was being ignored by [redacted] and pushed her to get her attention. Angel then called for [redacted] due to [redacted] pushing [redacted] and his use of explicit language. [redacted] then forcibly held [redacted] down on the couch while Angel grabbed mouthwash from the bathroom. While Angel poured mouthwash in his mouth, she missed some and it got in his eyes and on the rest of his face.

I then spoke with [redacted] who told me [redacted] started a verbal altercation with himself and Angel. [redacted] was called back to the room after [redacted] pushed Angel to get her attention and his use of explicit language. [redacted] then held [redacted] down on the couch because he was squirming, while Angel grabbed mouthwash from the bathroom. Angel poured mouthwash in his mouth.

I then spoke with Angel who told me [redacted] started a verbal altercation with herself and [redacted] She called [redacted] back to the room after [redacted] pushed Angel to get her attention and his use of explicit language. [redacted] then held [redacted] down on the couch because he was squirming, while Angel grabbed mouthwash from the bathroom. Angel then attempted to pour mouthwash in his mouth but mostly missed due to his movements.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

FORBES, RYAN SCOTT
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

10/30/2025
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MEYER, TREVOR AUSTIN (916)
NAME OF OFFICER (PLEASE PRINT)

10/30/2025
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

CONFIDENTIAL VICTIM INFORMATION PER MARSY'S LAW

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2025-011746

Charge Type: Check as many as apply.
☒ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
DEBLASIO, ANGEL LYN		W	F	03/23/1980

PROBABLE CAUSE STATEMENT

Based on the above statements made, I was able to conclude that Angel willfully abused [redacted] by committing an act that could reasonably be expected to cause mental injury. I was able to develop probable cause for the arrest of Angel DeBlasio pursuant to FSS 827.03(2C) Abuse Child without great bodily harm. She was transported to PBCJ.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

FORBES, RYAN SCOTT
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

10/30/2025
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MEYER, TREVOR AUSTIN (916)
NAME OF OFFICER (PLEASE PRINT)

10/30/2025
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork.
If applying for a warrant, attach this form to the filing packet.

1. Incident Report#: 20250011746 Agency: Boca Raton PD
   Offense: Child Abuse
   Suspect/Offender: Debiasio, Angel
   D.O.B. 3-23-1980 Race: W Sex: F

2. Warrant#(s): _____

3.a. [redacted]

b.

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

☐ Waiver: I choose not to be notified when the arrestee is released from custody.

☑ Confidential: Pursuant to F.S.119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).
Other confidentiality provisions of Florida State Statutes may also be applicable

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: Almeida, T. I.D.# 877 Date: 10-30-2025

White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER: _____ COURT CASE/WARRANT#: _____ (FOR WARRANTS USE ONLY)

Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 110 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	☐			
	☐			
Other	☐			
	☐			
	☐			
	☐			

REVIEW COMPLETED BY

Booking Number: 2025029106	**Date:** 10/31/2025
	Specialist Name/ID#: Angela Pinkney/7796