

OS 42662

23CF 7030AMB

Pch # 2126

ADVISOR Number		ARREST / NOTICE TO APPEAR		1. Arrest (No Warrant) 3. Request for Warrant 6. Arrest (Warrant) 4. Request by Copias 2. N.T.A. 5. Juvenile Referral		1		JUVENILE	
Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>		Agency Report Number (N.T.A.'s only) <b>3   2   2023-010317</b>					
Charge Type: Check as many as apply <input 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		If Weapon Seized Enter Type: <b>UNARMED</b>		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) <b>800 MEADOWS RD, BOCA RATON, FL 33486</b>				Location of Offense (Business Name, Address) <b>800 MEADOWS RD, BOCA RATON, FL 33486</b>					
Date of Arrest <b>08/16/2023</b>		Time of Arrest <b>14:53</b>		Booking Date <b>08/16/2023</b>		Booking Time <b>15:54</b>		Jail Date <b>08/16/2023</b>	
						Jail Time <b>15:45</b>		Location of Vehicle <b>N/A</b>	
Name (Last, First, Middle) <b>CARDE, BELITZA</b>									
Alias: _____ Alias (Name, DOB, Soc. Sec. #, Etc.) _____									
Race W - White B - Black O - Oriental/Asian		Sex <b>W</b> <b>F</b>		Date of Birth <b>11/29/1979</b>		Height <b>5'02</b>		Weight <b>145</b>	
Eye Color <b>BROWN</b>		Hair Color <b>BROWN</b>		Complexion <b>LIGHT</b>		Build <b>Small</b>			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status <b>S</b>		Religion <b>CATHOLIC</b>		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number) <b>5188 TENNIS LN, DELRAY BEACH, FL 33484</b>		(City)		(State)		(Zip)		Phone <b>(561) 961-9123</b>	
Permanent Address (Street, Apt. Number) <b>5188 TENNIS LN, DELRAY BEACH, FL 33484</b>		(City)		(State)		(Zip)		Phone <b>(561) 961-9123</b>	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone	
D/L Number, State <b>C630060799290 / FL</b>		Soc. Sec. Number		DNS Number		Place of Birth (City, State) <b>ARECIBO, PR, United</b>		Citizenship <b>US</b>	
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	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
Parent <input type="checkbox"/> Other <input type="checkbox"/> _____		Name (Last, First, Middle)		Residence Phone					
Legal Custodian <input type="checkbox"/>		Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Phone									
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 <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.						School Attended		Grade	
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property					
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Seize/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. Synthetic U. Unknown Z. Other	
Charge Description <b>POSSESSION OF COCAINE</b>		Statute Violation Number <b>893.13(6A) COC</b>		Violation of ORD #					
Drug Activity N		Drug Type N		Amount / Unit <b>73-10317</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
Charge Description <b>POSSESSION OF OXYCODONE</b>		Statute Violation Number <b>893.13(6A) OXY</b>		Violation of ORD #					
Drug Activity N		Drug Type N		Amount / Unit <b>73-10317</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
Charge Description <b>POSSESSION OF ALPRAZOLAM</b>		Statute Violation Number <b>893.13(6A) ALPR</b>		Violation of ORD #					
Drug Activity N		Drug Type N		Amount / Unit <b>73-10317</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
Health / Apparent Physical Condition of Defendant <b>GOOD</b>				Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries					
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond				<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input checked="" type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By <b>MCQUISTON</b>	
Transported By				Date Transported		Time Transported		Other <b>Released By MCQUISTON Released To PBCJ</b>	
<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court				<input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>			
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.				Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed			
MOLLE (Mandatory Order to Leave Law Enforcement) <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		MOLLE (Mandatory Order to Leave Law Enforcement) <input type="checkbox"/> Repeated Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) <b>MCQUISTON, D. K.</b>		LD # <b>785</b>		PAGE <b>1 OF 1</b>	
Intake Date <b>8/15/23</b>		I.D. # <b>MAKIS 23801</b>		Pouch #		Transporting Officer <b>Houac</b>		I.D. # <b>876</b>	
Agency <b>BOCA</b>		Witness here if subject signed with an "X".							

SCANNED  
AUG 17 2023

FILED PBC - GUN CLUB--  
23 AUG 17 AM 12:28

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

Agency ORI Number <b>FL FLO500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2023-010317</b>
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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	Special Notes:
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Name (Last, First, Middle) <b>CARDE, BELITZA</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>11/29/1979</b>
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Charge Description <b>893.13(6A) COC POSSESSION OF COCAINE</b>	Charge Description <b>893.13(6A) OXY POSSESSION OF OXYCODONE</b>
Charge Description <b>893.13(6A) ALPR POSSESSION OF ALPRAZOLAM</b>	Charge Description

Victim's Name (Last, First, Middle) <b>STATE OF FLORIDA,</b>	Race <b>U</b>	Sex <b>U</b>	Date of Birth
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Local Address (Street, Apt. Number) <b>100 NW 2ND AVE, BOCA RATON, FL 33432</b>	(City)	(State)	(Zip)	Phone <b>(561) 338-1234</b>	Address Source
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Business Address (Name, Street) <b>(561) -</b>	(City)	(State)	(Zip)	Phone <b>(561) -</b>	Occupation
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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...  
 committed the below acts in my presence.  was observed by \_\_\_\_\_ who told \_\_\_\_\_ that he/she saw the arrested person commit 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 16 day of August, 2023 at 16:41 (Specifically include facts constituting cause for arrest.)

The following incident was captured on mobile video (Avail.)

On 08/16/2023, at approximately 1252 hours, I responded to 800 Meadows Road (Boca Raton Regional Hospital (BRRH)) in reference to found property. Upon arrival, I made contact with BRRH Security Manager, Samantha Sireci. Sireci stated that BRRH Security had found a small bag of suspected narcotics at the front entrance of the hospital. BRRH Security took custody of the suspected narcotics and reviewed camera footage and observed on video surveillance a female walking into the hospital and dropping the bag of suspected narcotics out of her purse while manipulating her purse. Sireci stated that the female had identified herself as Belitza Carde and visited a patient at the hospital (Room 209A) with Migueal Pena. Sireci stated that Carde and Pena were still in the hospital room with the patient at the time of reporting and wished to have me speak with both parties outside of the hospital main entrance as to not disturb other patients on the floor. I stood by with BRRH Security as Sireci and other BRRH Staff requested Carde and Pena to leave the hospital. At the entrance of the hospital in the parking garage I made contact with Carde and identified myself as a BRPD Officer and informed her that I would be detaining her for a narcotics investigation.

I informed Carde of her Constitutional Warnings from a pre-printed BRPD Miranda Card and she agreed to speak with me. Carde stated that the bag that she had on her person at the time I made contact with her as well as observed on CCTV was in fact her bag. I informed her that she was observed on CCTV dropping a bag of suspected cocaine based upon my training and experience. Carde stated that she did not know that she had dropped any drugs while entering the hospital and stated that I could drug test her. I informed her that using drugs and possessing drugs are separate issues. I inquired if she or Pena had knowledge of the suspected cocaine, which she denied. As Carde was still in possession of the bag observed on CCTV, I asked if she had any additional drugs inside of her bag and she stated that she was carrying prescription medication for Pena

SWORN AND SUBSCRIBED BEFORE ME

**KINGMAN, DARRYL M JR**  
 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)  
08/16/2023  
 DATE

*Derek Keith McQuiston*  
 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  
**MCQUISTON, DEREK KEITH (785)**  
 NAME OF OFFICER (PLEASE PRINT)  
08/16/2023  
 DATE

Agency ORI Number **FL FL0500200** Agency Name **BOCA RATON POLICE DEPARTMENT** Agency Report Number **3 | 2 | 2023-010317**

Charge Type: Check as many as apply.  1. Felony  2. Traffic Felony  3. Misdemeanor  4. Traffic Misdemeanor  5. Ordinance  6. Other Special Notes: \_\_\_\_\_

Name (Last, First, Middle) **CARDE, BELITZA** Alias \_\_\_\_\_ Race **W** Sex **F** Date of Birth **11/29/1979**

including 0.5mg Alprazolam and 30mg Oxycodone but had no other drugs. I asked Carde for consent to search her bag and she agreed. It should be noted that while I inquired about who the owner of the suspected cocaine could be she gestured towards the hospital and said his eluding that the drugs belonged to the patient at the hospital. Carde stated that she had been at the patient's apartment earlier and that he had weed and steroids, and that the suspected cocaine could've been from there.

Inside of her bag, I found the two medications bottles prescribed to Pena, 0.5mg Alprazolam and 30mg Oxycodone. Additionally, I discovered a half-bitten Oxycodone and two pieces of pills, which I suspected as Xanax based upon my training and experience (which was later confirmed by Poison Control agent Jhosef (ID 164284) to be an Alprazolam 2mg.) I inquired again about what pills and dosage for Alprazolam and she stated that there should not be any Xanax in her bag and that she had stopped taking them about 10 years ago due to health concerns. It should be noted that the pills, inside of her bag, not in an appropriate container and she did not produce a prescription for the medication. It should also be noted that the half bitten Oxycodone was not in the appropriately labeled pill container.

I requested Officer Saavedra to speak with Pena regarding the suspected cocaine and he denied any knowledge of it. Pena provided identification on scene and was given his prescribed medication as well as other property on scene and left without incident. It should be noted that the suspected cocaine was field tested positive, as evidenced by a blue color when the powder was exposed to the testing agent (photos submitted as evidence Avail.)

Based upon the findings of my investigation, I developed probable cause to arrest Belitza Carde for Possession of Controlled Substances pursuant to Florida State Statue 893.13(6A.) for possession of Schedule 2 substance cocaine, for possession of Schedule 2 substance Oxycodone and possession of Schedule 4 substance Alprazolam. All narcotics were submitted as evidence at the police department. Cadre was processed at the BRPD booking facility and ultimately transported to Palm Beach County Jail.

SWORN AND SUBSCRIBED BEFORE ME

**KINGMAN, DARRYL M JR**  
 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)  
 08/16/2023  
 DATE

*[Signature]*  
 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  
**MCQUISTON, DEREK KEITH (785)**  
 NAME OF OFFICER (PLEASE PRINT)  
 08/16/2023  
 DATE

PAGE 2 OF 2



# 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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	119.0712(2)	Other: Personal information contained in a motor vehicle record	
	<input type="checkbox"/>	316.650(b)	Other: Driver information contained in a uniform traffic citation	

REVIEW COMPLETED BY

Booking Number: 2023021414	Date: 8/17/2023
	Specialist Name/ID: M. Tooks #8557