05401667

23CT9210

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

1/12

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 | 2023-006677

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

Location of Arrest (Including Name of Business): , 2400 N DIXIE HWY, BOCA RATON, FL 33431
Location of Offense (Business Name, Address): 2400 N DIXIE HWY, BOCA RATON, FL 33431

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/22/2023	03:52					

DEFENDANT

Name (Last, First, Middle): BARBULESCU, IONICA MIHAELA
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	05/17/1986	5'06	100	BLACK	BLACK	LIGHT	Small

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)
Marital Status: S
Religion
Indication of: Alcohol Influence ☐ Yes ☐ No ☒ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 1500 BAY RD UNIT S, MIAMI BEACH, FL 33139
Phone: (850) 428-4207
Residence Type: 1. City 3. Florida 2. County 4. Out of State: S

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 1500 BAY RD UNIT S, MIAMI BEACH, FL 33139
Phone: (850) 428-4207
Address Source: FL DL

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
B614413866770 / FL			BRASOV, ROMANIA	RO

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

Notified by: (Name) 1 OR | 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 ☒ 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 #
LEAVE SCENE OF ACCIDENT	316.061(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

1

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
Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health
PROPERTY - Received By | Released By | Released To

Transported By | Date Transported | Time Transported | Other

NOTICE TO APPEAR

☐ INSTRUCTION NO. 1 - Mandatory appearance in court
☒ 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: 6/27/23 8:30 am

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

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

ADMIN

HOLD for Other Agency
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Intake Deputy I.D. # Pouch #

Signature of Arresting Officer
Name of Arresting Officer (Print): SORIA, K. C. I.D. #: 850
Transporting Officer: BRADLEY I.D. #: 668 Agency: BRSO

Name Verification (Printed by Arrestee) (PRINT)
Witness here if subject signed with an "X".

PAGE 1 OF 1

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SCANNED
MAY 30 2023

FILED PBC - CLERK CLUB
'23 MAY 23 AM 8:04

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

JUVENILE:

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2023-006677

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
BARBULESCU, IONICA MIHAELA		W	F	05/17/1986

CHARGES

Charge Description	Charge Description
316.061(1) LEAVE SCENE OF ACCIDENT	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
MCAFEE, MADISON LEIGH	W	F	04/10/1998

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
4121 E BUSCH BLVD 301, TAMPA, FL 33617	(813) 928-0053	
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**

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.
☐ confessed to _____ admitting to the below facts.
☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.
☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 22 day of May, 2023 at 03:52 (Specifically include facts constituting cause for arrest.)

On 05/22/2023 at approximately 0234 hours I responded to the area of 300 S Federal Hwy in reference to a hit and run. Upon arrival I made contact with the victim, Madison Mcafee.

Mcafee stated she was traveling southbound on S Federal Hwy when she was at a complete stop at a red light. While at the redlight, a vehicle, later identified as a gray Mercedes (FL - AY43IY) side swiped the driver side of Mcafee`s vehicle. Both vehicles turned westbound on SE 3rd St. where the driver of the Mercedes, Ionica Barbulescu told the victim, she would stop but continued driving. Mcafee took a video of Barbulescu fleeing the scene which showed her as the driver as well as a clear view of the license plate.

Ofc. Subuyu located the suspect vehicle shortly after the crash and initiated a traffic stop in the area of 2400 N Dixie Hwy. He made contact with the driver and sole occupant, Barbulescu. She advised she was coming from work and when asked about the damage to the vehicle; she stated she bought it like that. It should be noted that the vehicle damage is consistent with the damage to the victim`s vehicle.

Based on my investigation, I`ve developed probable cause to arrest Barbulescu for leaving the scene of an accident per F.S.S. 316.061(1). Barbulescu failed to stay on scene and provide the victim with her information as well as failed to make any attempt to notify law enforcement. Ofc. Walker responded to conduct a search of her person which yielded negative results for any contraband.

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KINGMAN, DARRYL M JR
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

05/22/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

SORIA, KEITH CESAR (850)
NAME OF OFFICER (PLEASE PRINT)

05/22/2023
DATE

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