0570394 26 CT 10413 ASB 1983

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile: 1 | N

ADMINISTRATION

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL0500300	BOYNTON BEACH POLICE DEPT.	34-26-064146

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)	Location of Offense (Business Name, Address)
111 E WOOLBRIGHT RD, BOYNTON BEACH, FL, 33435	111 E WOOLBRIGHT RD, BOYNTON BEACH, FL, 33435

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/15/2026	21:37					TOWED

DEFENDANT

Name (Last, First, Middle): TREMBLAY, JULIANA GRACE
Alias (Name, DOB, Soc. Sec. #, Etc)

W - White I - American Indian B - Black O - Oriental / Asian	Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
	W	F	02/15/2004	5'1	120	HAZEL	BLONDE	FAIR	MEDIUM

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: SINGLE | Religion: UNK | Indication of: Alcohol Influence ☒ Y ☐ N ☐ Unk. | Drug Influence ☐ Y ☐ N ☒ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Residence Type (1. City 2. County 3. Florida 4. Out of State)
2871 N OCEAN BLVD #R654, BOYNTON BEACH, FL, 33435	(402)450-3235	3

Permanent Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
1332 BANCROFT DR , LONGWOOD, FL, 32779	( ) -	FL DL

Business Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Occupation
	( ) -	UNK

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship
T244286766000 / FL	[redacted]		CONCORD, NH	YES

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile
				☐ 1. ☐ 2. ☐ 3. ☐ 4. ☐ 5.
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. ☐ 2. ☐ 3. ☐ 4. ☐ 5.

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other — Name (Last) (First) (Middle) | Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) | Business 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 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 561-355-2526) informed of any change of address: ☐ Yes, By: (Name) ☐ No: (Reason) | 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. Dispense/ Distribute M. Manufacture Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbituate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
DUI CRASH WITH PROP DAMAGE	1	☐ Yes ☒ No	316.193.3.C.1	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	26-064146		

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
LEAVING THE SCENE OF CRASH WITH PROP DAMAE	2	☐ Yes ☒ No	316.061(1)	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	26-064146		

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
REFUSAL TO BREATH TEST	1	☐ Yes ☐ No	316.1939.1D	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	26-064146		

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444

Court Date and Time: Month SEPTEMBER Day 28 Year 2026 Time 08:30 ☒ A.M. ☐ P.M.

FILED BDC - CLERK'S OFFICE AUG 16 AM 5:34

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

ADMIN.

HOLD for other Agency Name:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Signature of Arresting Officer: [signature] 1105

Name of Arresting Officer (Print): ALEXIS I.D. # 1105

Name Verification (Printed by Arrestee) (PRINT)

BU#

Intake Deputy: DS Williams 08/16 I.D. # | Pouch #

Transporting Officer: ALEXIS I.D. # 1105 Agency BBPD

Witness here is subject Signed with an "X".

Page 1 OF 1

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 15 **DAY OF** August **2026 AT** 21:06 ☐ **A.M** ☒ **P.M.**

CASE #: 26-064146 **DEFENDANT:** TREMBLAY, JULIANA GRACE

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On the above date and time, Boynton Beach PD received a call regarding a hit-and-run crash that occurred in the area of 630 E Woolbright Rd, Boynton Beach, Palm Beach County, FL, 33435. The caller, an off-duty firefighter (Ian Finlayson), advised that a purple BMW, driven by a white female, backed into a parked Dodge Charger, then pulled forward and struck a building. The caller/witness also said that the vehicle struck another vehicle before fleeing the scene. The witness maintained visual of the vehicle and the call taker with an updated location.

Ofc Roedel responded to the call, located the suspect vehicle, and conducted a traffic stop at the Shell Gas station located at 111 E Woolbright Rd, Boynton Beach. The driver, later identified as JULIANA GRACE TREMBLAY, was detained after she refused to comply.

I arrived at the gas station and made contact with Juliana, who was with officers. Juliana's vehicle, a Purple BMW bearing FL tag 31ECUG, was observed with multiple damages to the rear bumper, front bumper, left and right sides. Pictures were taken as evidence. Juliana was observed with bloodshot, red, and glassy eyes, a pale face, and there was an odor of an unknown alcoholic beverage emanating from her person and her mouth. She had obvious and apparent signs of impairment and spoke with slurred speech. When asked if she was involved in a crash, Juliana said YES. Juliana said she had no injuries. BBFD was requested and cleared Juliana on scene.

I spoke to the caller/witness, who stated that he and his wife were at the 630 E Woolbrigth Rd location when they heard the first crash of the BMW backing into a parked Dodge Charger. The witness stated that they observed the BMW pull forward, jump the curb, and strike a fire hydrant in front of the building. The BMW then backed up, at which time the left side swiped another parked Audi SUV. The witness stated that the driver fled the scene in the vehicle, after which they began following the suspect vehicle while calling the police. The witness was at the Gas station when officers detained the suspect.

I then responded to 630 E Woolbright and observed the following. The green Dodge Charger, bearing FL tag DS13TE, was parked facing east, unoccupied. The vehicle sustained minor damage to the front

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bumper. The Black Audi was parked unoccupied across and sustained moderate damage to the right side. A fire Hydrant also sustained minor damage. Crash report completed.

I went back to the Gas Station and attempted to speak to Juliana, at which time she asked for her lawyer after a Miranda warning. I then informed Juliana of her charges for leaving the scene of a crash. I also advised that I suspected that she was under the influence of an alcoholic beverage and asked her if she would be willing to do the Standardized Field Sobriety Exercises to dispel my suspicion, which she agreed.

SFST.

HGN: Instructions were provided to Juliana who stated she understood. During the penlight task, Juliana kept moving her head several times and had to be told not to. She had difficulty following the penlight at times.

HORIZONTAL GAZE NYSTAGMUS:

- ☐ Left eye does not follow smoothly
- ☐ Left eye prior to 45 degrees
- ☐ Distinct jerking in left eye at maximum deviation
- ☐ Vertical Nystagmus in left eye
- ☐ Right eye does not follow smoothly
- ☐ Right eye prior to 45 degrees
- ☐ Distinct jerking in right eye at maximum deviation
- ☐ Vertical Nystagmus in right eye

WALK AND TURN:

Instructions were provided and demonstrated to Juliana who stated she understood. During the instruction phase, Juliana could not remain on the line and stepped off; she started the exercise too soon During the performance phase, Juliana;

Missed heel to toe on every step

Took more than 9 steps

Used her arms for balance

Stepped off the line

Made an improper turn.

ONE LEG STAND:

Instructions were provided and demonstrated to Juliana who stated she understood. At one point, Juliana said she would not continue with the SFST, at which time I informed her of the Taylor warnings. Juliana:

Was swayed while balancing

Used her arms for balance

Put her foot down at the 10 seconds

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FINGER TO NOSE:
Instructions were provided and demonstrated to Juliana who stated she understood. Juliana kept starting the exercise without instructing to do so. During the performance phase, Juliana had to be told multiple times to close her eyes, and kept her head backward. Juliana

Did not touched the tip of her nose

Did not return her hand to the side

Used the wrong hands

ROMBERG/ALPHABET:
Juliana was asked to recite the English alphabet and could not perform this task.

During inventory of Juliana's vehicle, officers located

1 empty glass bottle of Espolon Tequila

1 empty bottle of Tequila Blanco and 1 empty Vodka bottle. All 3 bottles had remaining alcoholic beverage inside.

Based on my investigation Juliana was arrested for suspicion of DUI. I then informed Juliana that she would be transport to the Boynton Beach Police Department to conduct a breath test, at which time she stated that she would not provide a breath test. I asked Juliana two more times just to confirm and she said she would refuse the breath test. I then read Juliana the implied consent form and she stated she understood. Juliana was given another opportunity and refused the breath test. Juliana was then transported to Bethesda Hospital for medical clearance.

JULIANA GRACE TREMBLAY was charge with:

2 counts of Leaving the scene with prop damage according to FSS 316.061(1)

DUI with prop damage according to FSS 316.193.3.C.1

Refusal to breath test according to FSS 316.1939.1D.

She transported and booked at the Palm Beach County Jail.

The following instrument was sworn to before me this 15 day of August 2026

By: OFC ALEXIS

Notary/Police Officer (F.S.S. 117.10)

1105

Signature of Arresting Officer

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CASE #: 26-064146 **DEFENDANT:** TREMBLAY, JULIANA GRACE

QUESTIONS AND ANSWERS

I am now going to ask you some questions, with these rights in mind, you may answer some of, all of, or none of the following questions as you like.

Where you operating a motor vehicle at the time of the stop/Accident? _____
Where were you going? _____
What Street or Highway were you on? _____
What was you direction of travel? _____
Where did you start from? _____
What time did you start? _____
What time is it now? _____
What is today's date? _____
What day of the week is it? _____
What City and County are you in now? _____
When did you last eat? _____
What did you eat? _____
What have you been doing for the last three hours? _____
How much do you weigh? _____
Have you been drinking? _____
What have you been drinking? _____
How much? _____
With whom? _____
When did you have your first drink? _____
When did you have your last drink? _____
Can you feel the effects of the alcohol? _____
Are you under the influence? _____
Have you consumed any alcohol since the stop/accident? _____
How much? _____ What? _____ Where? _____ When? _____
What line of work are you in? _____
When did you last work? _____
Do you have any physical defects or injuries? _____ What? _____
Are you sick or injured? _____ What's wrong? _____
Do you limp? _____
Did you receive a bump on the head recently? _____
Where you in an accident today? _____
Have you taken any drugs or smoked any marijuana today? _____ When? _____
Have you seen a doctor or dentist today? _____
Who? _____ Why? _____
Are you taking any prescription medicines? _____
What? _____ When? _____
Do you have? Epilepsy _____ Glass Eye _____ False teeth _____
Ear infection _____ Inner ear trouble _____ Diabetes _____
Do you have any problems with you eyes that are not corrected by glasses? _____
Do you take insulin? _____ If so, when was your last injection? _____
Have you ever gad a driver's license in any other state? _____
Where? _____
Interviewer: _____

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CASE #: 26-064146 DEFENDANT: TREMBLAY, JULIANA GRACE

Arresting Officer: ALEXIS
Address: 2100 HIGH RIDGE ROAD, BOYNTON BEACH, FL 33426
Phone Numbers: Home: _____ Work: (561) 742-6100

Name: OFC ROEDEL
Address: _____
Phone Numbers: Home: _____ Work: _____
Can testify to: _____

Name: IAN FINLAYSON
Address: BOYNTON BEACH FIRE RESCUE
Phone Numbers: Home: 561-308-3677 Work: _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ Work: _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ Work: _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ Work: _____
Can testify to: _____

Name: _____
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Phone Numbers: Home: _____ Work: _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ Work: _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ Work: _____
Can testify to: _____

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TESTING FACILITY TASK REPORT

CASE #: 26-064146
Date: 8/15/26

DEFENDANT: TREMBLAY, JULIANA GRACE
Video Tape #: BWC

BREATH TEST RESULTS: REFUSED

1. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
2. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
3. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
4. ____ g/210L Time _____ ☐ a.m. ☐ p.m.

BREATH OPERATOR: OFC VLADIMIR ALEXIS
MAINTENANCE TECHNICIAN: OFC VLADIMIR ALEXIS

TESTING OFFICER'S OBSERVATIONS

SPEECH:
ATTITUDE:
CLOTHING:
MEDICAL CONDITIONS:
MEDICATIONS:
OTHER:

COMMENTS:

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26-064146

STATE OF FLORIDA
IMPLIED CONSENT WARNINGS

NOT APPLICABLE WITH VOLUNTARY CONSENT

BREATH TESTING

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

Will you take the test? on BWC

NOTE: *READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"*

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. If you refuse to take the test I have requested of you, and if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for a refusal to submit to a lawful test of your breath, urine, or blood, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, in addition to any other penalties which can be imposed by law. Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

Do you still refuse to submit to this test?

NOTE: *IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV).*

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

Do you still refuse to submit to this test?

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Funded by FDOT

DRIVE SOBER OR GET PULLED OVER

Revised: 10/01/2025

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, Vladimir Alexis, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)
member of Boynton Beach Police Department, and I do swear
(Name of Law Enforcement Agency)
or affirm that on or about the 15 day of August, 2026, at 21:37 ☑P.M. ☐A.M.
DRIVER Juliana (FIRST NAME) Grace (MIDDLE OR MAIDEN NAME) Tremblay (LAST NAME),
DL # T244-286-76-600-0, state of FL, was placed under lawful arrest for
the offense of DUI by Vladimir Alexis (Name of Arresting Officer) and
issued citation # _____.

That on or about the 8 day of August, 2026, at 21:45 ☑P.M. ☐A.M.
in Palm Beach County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, and that he or she commits a misdemeanor of the second degree by so refusing. Additionally, I informed the driver that the refusal to submit to such test would result in the suspension of his or her driving privilege for a period of eighteen (18) months if his or her driving privilege had been previously suspended, or if he or she had been previously fined under s. 327.35215, F.S., for refusing to submit to a breath, urine, or blood test, and that he or she commits a misdemeanor of the first degree by so refusing. Nonetheless, the driver refused to submit to the test requested.

1105
_____
Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (s. 117.10, F.S.)

The foregoing instrument was sworn and subscribed before me:

1181
_____
Signature of Attesting Officer

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this _____ day of _____, 20 _____.
by _____,
who is personally known to me or who has produced _____ as identification.
Notary Public _____

Title OFFICER
Date 08/15/26

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

BAR1001

EFFECTIVE OCTOBER 1, 2025

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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	
	☐	119.071(2)(j)1.e.	Name of a law enforcement officer who, in the course of their duties became a victim, is confidential and exempt for 72 hours after the incident. This information is exempt for an additional 60 days after the initial 72 hours	
Public Info. Exemptions	☐	119.071(2)(j)1.b.(I)	Identity, home or employment phone number, home or employment address, or any other information that could be sued to locate or harass the victim	
	☐	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	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2026022317	**Date:** 8/16/2026
	Specialist Name/ID#: C. Daniels/ 30347