0331881 18CF11107 3435

OBTS Number

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile: 1 | N

Agency ORI Number	Agency Name	Agency Report Number
FL0509000	FLORIDA DEPARTMENT OF AGRICULTURE	OALE99ARR01293

Charge Type: Check as many as apply. ☑ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ Ordinance ☐ Other: _____

Weapon Seized / Type: NO

Multiple Clearance Indicator:

Location of Arrest (including name of Business): 9045 LA FONTANA BLVD 232, BOCA RATON, FL 33434

Location of Offense (Business Name, Address): 9045 LA FONTANA BLVD 232, BOCA RATON, FL 33434

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
11/19/2018	2:00 pm					

Name (Last, First, Middle): MEEDS, JOHN KAAREL

Alias (Name, DOB, Soc. Sec. #, Ect.):

Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	7/11/1974	601		BLU	BRO		

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

Marital Status: UNK

Religion: UNK

Indication of: Alcohol - No Drugs/Narcotics - No

Local Address:

Phone:

Residence Type: 1. City 2. County 3. Florida 4. Out of State

Permanent Address: 701 S J ST A, LANTANA, FL 33465

Phone:

Address Source:

Business Address: 9045 La Fontana Blvd Boca Raton, FL

Phone:

Occupation: Phone Sales

DL#, State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship
M320471742510 FL	[redacted]		CT	

Co-Defendant Name (Last, First, Middle):

Race Sex | Date of Birth | Arrested / At Large | Juvenile Felony Misdemeanor

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

Address (Apt. Number, Street) Business Phone

Notified by: (Name) Date Time

Juvenile Disposition: 1. Handled & Processed within Dept. and Released. 2. TOT HRS/CYF 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 365-2526) informed of any change of address.
☐ Yes, by: (Name) ☐ No: (Reason)

School Attended | Grade

Property Crime? ☐ Yes ☐ No | Description of Property | Value of Property

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 Activity: 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	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
PUBLIC ORDER CRIMES - SOLICIT SALE WITHOUT LICENSE	1		501.623.3	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
			18-3099		$ 0.00

☐ Instruction No. 1 Mandatory Appearance in Court.

☐ Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse Side.

Location (Court, Room Number, Address): MAIN COURTHOUSE, 205 NORTH DIXIE HIGHWAY, WEST PALM BEACH, FL 33401

Court Date and Time: Month: December Day: 19 Year: 2018 Time: 12:00 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 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) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer	ID#	Agency
ASARO, JOSEPH J	03227	OALE

Intake Deputy I.D. # Pouch #

Transporting Officer	ID#	Agency
	03227	OALE

Witness here if signed with an "X"

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - JAIL GOLD - DEFENDANT

NOT A CERTIFIED COPY

OBTS Number	PROBABLE CAUSE AFFIDAVIT	1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	N

Agency ORI Number	Agency Name	Agency Report Number
FL0509000	FLORIDA DEPARTMENT OF AGRICULTURE	OALE99ARR01293

Charge Type: Check as many as apply.
☑ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ Ordinance ☐ Other: _____

Special Notes:

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
MEEDS, JOHN KAAREL		W	M	07/11/1974

Charge Description
PUBLIC ORDER CRIMES - SOLICIT SALE WITHOUT LICENSE

Victim's Name (Last, First, Middle) | Race | Sex | Date of Birth

Local Address (Apt. Number, Street, City, State, Zip) | Phone | Address Source

Business Address (Name, Street, City, State, Zip) | Phone | 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. 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 commit the below acts.
☐ was found to have committed the below acts, resulting from my (described) investigation.

On the 19 day of November, 2018 at 2:00 pm (Specifically include facts constituting cause for arrest.)

Inv. Joe Asaro has probable cause to believe and does believe that on 11/19/2018 at approximately 12:00 PM at 9045 LaFontana Boulevard, Suite 232, Boca Raton, Palm Beach County, Florida, 33434, John Kaarel Meeds (dob 07/11/1974) was employed as an unlicensed telephone seller which is a violation of Florida State Statute 501.623(3).

Your affiant assisted the Florida Department of Agriculture and Consumer Services, Office of Agricultural Law Enforcement, Regulatory Investigative Section with a compliance inspection of East Coast Digital Solutions Inc. A search of department records revealed that East Coast Digital Solutions Inc. was unlicensed to conduct telemarketing sales in the state of Florida. Department records further confirmed John Kaarel Meeds was previously licensed by the department license #TP7643. The license was expired on 01/19/2017.

John Kaarel Meeds was subsequently arrested for Solicit Sales Without A License in violation of F.S.S. 501.623(3)

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / POLICE OFFICER

#2202

11-18-18
DATE

SIGNATURE OF ARRESTING/ INVESTIGATING OFFICER

ASARO, JOSEPH J
NAME OF OFFICER (PLEASE PRINT)

11/19/2018 3:35 pm
DATE

NOT A CERTIFIED COPY

2018 NOV 20 PM 1:01

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(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	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2018038649	**Date:** 11/19/2018
	Specialist Name/ID: J. Beck/9007