

2018 CF 005902 AKK

ARREST / NOTICE TO APPEAR

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

OBTS Number	Agency ORI Number <b>0500800</b>		Agency Name <b>West Palm Beach Police Department</b>		Agency Report Number (N.T.A.'s only) <b>9 / 4   2017-0017758</b>	
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
Location of Arrest (Including Name of Business)				Location of Offense (Business Name, Address) <b>2300 WITT ST, WEST PALM BEACH, FL 33401</b>		
Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
Name (Last, First, Middle) <b>GUZMAN, OMAR</b>			Alias: _____			
Race W - White B - Black	Sex <b>M</b>	Date of Birth <b>09/11/1979</b>	Height <b>5'11</b>	Weight <b>180</b>	Eye Color <b>BROWN</b>	Hair Color <b>BLACK</b>
Local Address (Street, Apt. Number) <b>651 OKEECHOBEE BLVD 1008, WEST PALM BEACH, FL 33401</b>			Phone <b>(561) 541-4499</b>		Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>	
Permanent Address (Street, Apt. Number) <b>651 OKEECHOBEE BLVD 1008, WEST PALM BEACH, FL 33401</b>			Phone <b>(561) 541-4499</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State	
Business Address (Name, Street)			Phone <b>(561) 541-4499</b>		Address Source	
D/L Number, State <b>G255640793310 / FL</b>	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship		
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 <input type="checkbox"/> 5. Juvenile	
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		Name (Last, First, Middle)			Residence Phone	
<input type="checkbox"/> Legal Custodian		Address (Street, Apt. Number)			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	
<input type="checkbox"/> Yes, by _____		<input type="checkbox"/> No		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. Smuggle D. Deliver E. Use	K. Disperse/ 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>WORTHLESS CHECK-OBTAIN GOODS SERVICES DEBT CARD</b>				Statute Violation Number <b>832.05(4B) 4c</b>	Violation of ORD #	
Drug Activity	Drug Type <b>N</b>	Amount / Unit	Offense #	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number
Charge Description				Statute Violation Number	Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Charge Description				Statute Violation Number	Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Health / Apparent Physical Condition of Defendant				Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries		
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail				PROPERTY - Received By		
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health				Released By		
Transported By				Date Transported	Time Transported	Other
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court				Location (Court, Room)		
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				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		
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed		
HOLD for Other Agency		Signature of Arresting Officer <b>MALDONADO 1899</b>		Name Verification (Printed by Arrestee)		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest		Name of Arresting Officer (Print) <b>MALDONADO, FRANCISCO</b>		(PRINT)		
<input type="checkbox"/> Suicidal <input type="checkbox"/> Other		I.D.# <b>01899</b>				
Intake Deputy	I.D.#	Pouch #	Transporting Officer	I.D.#	Agency	PAGE 1 OF 1
Witness here if subject signed with an "X".						

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

PROBABLE CAUSE AFFIDAVIT

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

**3** JUVENILE

OBTS Number		
Agency ORI Number <b>FL 0500800</b>	Agency Name <b>WEST PALM BEACH POLICE DEPARTMENT</b>	Agency Report Number <b>9   4   2017-0017758</b>
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
Name (Last, First, Middle) <b>GUZMAN, OMAR</b>		Alias Race: <b>W</b> Sex: <b>M</b> Date of Birth: <b>09/11/1979</b>
Charge Description <b>4C 832.05(4) WORTHLESS CHECK-OBTAIN GOODS SERVICES DEBT</b>	Charge Description	
Charge Description	Charge Description	
Victim's Name (Last, First, Middle) <b>SCP,</b>	Race Sex Date of Birth	
Local Address (Street, Apt. Number) (City) (State) (Zip) <b>2300 WITT ST, WEST PALM BEACH, FL 33405</b>	Phone <b>(561) 242-1241</b>	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.  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 **11** day of **June**, **2018** at **15:06** (Specifically include facts constituting cause for arrest.)

On April 28th 2017 Omar Guzman, owner of Liquid Art Custom pools placed an order for four (4x) Magicbowl pool bowls with FireFX LED Light Engine (SCP order# D4672215).  
The products were shipped on July 11th 2017 after Guzman calls in to notify he is ready for delivery. The products were delivered to Guzman's home 1824 Laurel Lane West Palm Beach FL.  
On the same date, Ruth Ann Martin (SCP Accounts Receivable) attempts to collect payment from Guzman but Guzman's credit cards are declined.  
On July 18th, Omar Guzman sends an image of a check for payment to Karen Fischer (SCP Account Credit Manager).  
The check was written by Omar Guzman from his business account, Liquid Art Custom Pools Inc., account number [REDACTED] check number 1055, drawn off of TD Bank, for \$4,285.61.  
This check was written for SCP order number D4672215. The order was for four (4x) Magicbowl pool bowl with FireFX LED Light Engine.  
The TD Bank account [REDACTED] records and statements were subpoenaed and received.  
The bank statement for June 12th 2017 - July 11th 2017, one month prior to the check being written had a beginning balance of \$2,299.68 and an ending overdrawn balance of (-\$770.69).  
The bank statement for July 12th 2017 - August 11th 2017, the month of check #1055 being written, the beginning balance was overdrawn (-\$770.69) and the ending balance was overdrawn

SWORN AND SUBSCRIBED BEFORE ME	
<b>DEPETRO, STEVEN</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER 
 DATE <b>06/11/18</b>	<b>MALDONADO, FRANCISCO (01899)</b> NAME OF OFFICER (PLEASE PRINT)
	DATE
	PAGE <b>1 OF 2</b>

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

1. Arrest  
2. N.T.A

3. Request for Warrant  
4. Request for Capias

3

JUVENILE

A D M I N	OBTS Number		Agency ORI Number <b>FL 0500800</b>		Agency Name <b>WEST PALM BEACH POLICE DEPARTMENT</b>		Agency Report Number <b>9   4   2017-0017758</b>	
	Charge Type Check as many as apply		Special Notes		Name (Last, First, Middle) <b>GUZMAN, OMAR</b>		Race <b>W</b>	Sex <b>M</b>

D E F	<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	
-------------	---	--	--	--	--	--	---------------	--

(-\$880.68). The average collected balance was (-\$1,516.83). There were no deposits made during this statement period. One check drawn for \$3,958 which was returned and the victims check which was attempted to be drawn twice and returned both times.

The bank statements are addressed to Liquid Art Custom Pools Inc., 3677 23rd Ave S suite B102, Lake Worth FL 33461.

On 03/07/18, I met with Omar Guzman at 3677 23rd Ave S suite B102. Guzman invited detectives into his office for a conversation. He confirmed he received the products. He states he provided a check and alleges he asked SCP not to deposit the check until he received funds for the project from the customer.

On 03/14/18 representatives from SCP Distributors provided a sworn statement, advising they delivered the product and have not received payment. The check (1055) provided by Omar Guzman was returned NSF.

Through the investigation, it was determined that; Mr. Guzman knew or should have known that the TD Bank account, [REDACTED] did not have sufficient funds at the time he provided check# 1055 for \$4,285.61 to pay for products he received from SCP Distributors LLC.

Based on the above facts, there is Probable Cause to charge Omar Guzman with violation of F.S.S 832.05(9) (a) Giving Worthless Check over \$150.  
[06/11/2018 15:55, FMALDONADO, 1280, WPB]

NOT A CERTIFIED COPY

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	 <b>DEPETRO, STEVEN</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		 <b>MALDONADO, FRANCISCO (01899)</b> NAME OF OFFICER (PLEASE PRINT)	
	DATE <b>06/11/18</b>		DATE	
			PAGE 2 OF 2	