0503194 (NR) 18CF11109 2088

| OBTS Number | ARREST / NOTICE TO APPEAR<br>Juvenile Referral Report | 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 | OALE99ARR002121 |

| Charge Type Check as many as apply | Weapon Seized / Type | Multiple Clearance Indicator |
|---|---|---|
| ☑ 1 Felony ☐ 3. Misdemeanor ☐ Ordinance ☐ 2 Traffic Felony ☐ 4. Traffic Misdemeanor ☐ Other: _____ | NO | |

| Location of Arrest (including name of Business) | Location of Offense (Business Name, Address) |
|---|---|
| 9045 LA FONTANA BLVD 232, BOCA RATON, FL 33434 | 9045 LA FONTANA 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 | 12:30 pm | | | | | |

Name (Last, First, Middle): PUSTIZZI, ROBERT ANTHONY

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

| Race | Sex | Date of Birth | Height | Weight | Eye Color | Hair Color | Complexion | Build |
|---|---|---|---|---|---|---|---|---|
| W | M | 10/10/1991 | 510 | 220 | brn | brn | med | med |

| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) | Marital Status | Religion | Indication of: |
|---|---|---|---|
| | Unk | Unk | Alcohol - No Drugs/Narcotics - No |

| Local Address | Phone | Residence Type. 1 City 2 County 3 Florida 4 Out of State |
|---|---|---|
| | | |

| Permanent Address | Phone | Address Source |
|---|---|---|
| 10956 NW 18TH DR , PLANTATION, FL 33322 ✓ | | |

| Business Address | Phone | Occupation |
|---|---|---|
| 9045 Lafontana Blvd Boca Raton, FL | | Telephone Sales |

| DL#, State | Soc. Sec. Number | INS Number | Place of Birth | Citizenship |
|---|---|---|---|---|
| P232761913700 FL | [redacted] | | Hollywood, FL | US |

| 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 |
|---|---|---|---|
| | | 11/19/2018 | |

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: O'AON 8102 Grade:

| Property Crime? | Description of Property | Value of Property |
|---|---|---|
| ☐ Yes ☐ No | | 0 |

**Drug Activity**: S. Sell, B. Buy, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Dispense/ Distribute, M. Manufacture/ Produce/ Cultivate, P. Possess, N N/A, 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) |
|---|---|---|
| ☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: | Name of Arresting Officer: T.M FEINER ID#: O2702 Agency: | (PRINT) |
| Intake Deputy: C [illegible] # Pouch # | Transporting Officer: Feiner ID#: 2702 Agency: OALE | Witness here if signed with an "X" |

Page 1 of 2

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

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| 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 | OALE99ARR002121 |

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

Special Notes:

| Name (Last, First, Middle) | Alias | Race | Sex | Date of Birth |
|---|---|---|---|---|
| PUSTIZZI, ROBERT ANTHONY | | W | M | 10/10/1991 |

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 1.00 pm (Specifically include facts constituting cause for arrest.)

Inv Tara Feiner 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, Robert Anthony Pustizzi 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 the defendant was previously denied a license for a criminal history To date he has not re-applied for a Commercial Telephone Salespersons License as required by law.

Robert Anthony Pustizzi 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

11-19-2018
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

T.M.FEINER
NAME OF OFFICER (PLEASE PRINT)

11/19/2018 1.56 pm
DATE



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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:** 2018038647 | **Date:** 11/20/2018 |
| | **Specialist Name/ID:** J. Beck/9007 |