

JKT# 0176539

P# 3861

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report					1 Arrest 2 NTA.	3. Request for Warrant 4. Request for Capias	1	Juvenile			
ADMINISTRATIVE	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 16-1157							
	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			If Weapon Seized Enter Type			Multiple Clearance Indicator 03						
Location of Arrest (including Name of Business) 6280 Forest Hill Blvd				Location of Offense (Business Name, Address) Same									
Date of arrest 10/14/16		Time of Arrest 12:00		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle					
DEFENDANT	Name (Last, First, Middle) Kahook Waseem Naim					Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex M	Date of Birth 09/15/1971	Height 5'8	Weight 200	Eye Color brn	Hair Color blk	Complexion med	Build med			
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)					Marital Status	Religion		Indication of: Alcohol Influence Drug Influence				
	Local Address (Street, Apt. Number) 1701 Mango Cir		(City) West Palm	(State) FL	(zip) 33406	Phone ()	Residence Type 1. City 2. County		3. Florida 4. Out of State				
	Permanent Address (Street, Apt. Number)		(City)	(State)	(zip)	Phone ()	Address Source						
	Business Address (Name, Street) 6280 Forest Hill Blvd		(City)	(State)	(zip)	Phone ()	Occupation Store Owner						
	D/L Number, State K200-894-71-335-0					INS Number	Place of Birth (City, State) Ireal		Citizenship US				
	Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
	Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
CO-DEFENDANT	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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 <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. Yes, by: (Name) No: (Reason)								School Attended			Grade	
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property						Value of Property				
	CODE	Activity N. NIA 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. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv	P. Paraphernalia/ U. Unknown Equipment S. Synthetic.	Z. Other
		Charge Description Dispense Optical Device W/O License		Counts 2	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 484.013 1c			Violation of ORD # 3000 X 1 (B6)			
	CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	16-1157			Warrant / Capias Number			Bond	
Drug Activity		Drug Type	Amount / Unit	Offense #				Warrant / Capias Number			Bond		
CHARGE	Charge Description OPERATING OPTICAL ESTABLISHMENT W/O PERMIT			Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 484.013 (4)	Violation of ORD # OR					
	Drug Activity	Drug Type	Amount / Unit	Offense #			Warrant / Capias Number	Bond					
CHARGE	Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number	Violation of ORD # 16-1157					
	Drug Activity	Drug Type	Amount / Unit	Offense #			Warrant / Capias Number	Bond					
CHARGE	Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number	Violation of ORD # 16-1157					
	Drug Activity	Drug Type	Amount / Unit	Offense #			Warrant / Capias Number	Bond					
NOTICE TO APPEAR	Location (Court, Room Number, Address)												
	Court Date and Time												
Month		Day		Year		Time		A.M. 10:00 P.M. 12:00					
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 Verification (Printed by Arrestee)				
	Name [Redacted]								(PRINT) 0CT 14 2016 1:23				
Intake		#	Pouch #							PAGE 1 OF 1			
Witness here if suspect signed with me													

PROBABLE CAUSE AFFIDAVIT

<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">OBTS Number</div> <div style="width: 50%; text-align: right;"> 1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias </div> </div>	Juvenile <input checked="" type="checkbox"/> 1						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; vertical-align: top;"> Agency ORI Number FLO 5 0 0 0 0 0 </td> <td style="width: 50%; vertical-align: top;"> Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE </td> <td style="width: 25%; vertical-align: top;"> Agency Report Number 06-16-1157 </td> </tr> <tr> <td colspan="2"> Charge Type: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other </td> <td>Special Notes:</td> </tr> </table>		Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-16-1157	Charge Type: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:
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D E F F E N D A N T	Defendant's Name (Last, First, Middle) Kahook, Waseem Naim		Race <input type="checkbox"/> Other <input checked="" type="checkbox"/> W Sex <input type="checkbox"/> Male Date of Birth 9/15/1971				
C H A R G E S	Charge Description Dispense of Optical Device w/o License		Charge Description				
V I C T I M	Charge Description Operating Optical Establishment w/o permit		Charge Description				
Victim's Name (Last, First, Middle) State of Florida		Race <input type="checkbox"/> Sex <input type="checkbox"/> Date of Birth					
Victim's Local Address (Street, Apt. Number) (City) (State) (Zip) Florida		Phone <input type="checkbox"/> Address Source					
Victim's Business Address (Name, Street) (City) (State) (Zip) Florida		Phone <input type="checkbox"/> 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...							
<input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts.		<input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. (Specifically include facts constituting cause for arrest).					
NARRATIVE: <p>During the month of July 2016 PBNF(Palm Beach County Narcotic Task Force) received a compliant that the Boost Mobile store located at 6280 Forest Hill Blvd, Greenacres, FL is selling and dispensing colored contacts lenses. These lenses are displayed and sold openly inside the store. Department of Health (DOH) Investigator [REDACTED] confirmed that Boost Mobile nor its owner and operator Waseem Naim Kahook have the proper licensing or medical personnel necessary to sell or dispense any medical devices, including cosmetic colored contact lenses.</p> <p>On July 27, 2016 at approximately 1400 I entered the Boost Mobil Store with [REDACTED] in an undercover capacity in an attempt to purchase the contact lenses. [REDACTED] The following is a summary of the transaction. Please refer to the [REDACTED] for a detailed account. Upon entering the store we were greeted by a Hispanic male employee who was standing behind the counter the male identified himself as Brian. I observed a glass case on the left hand side of the store with contained several glass shelves. Several packets of colored contact lenses were openly displayed inside the case with a sign stating "Contact Lenses \$15". Brian stated that the lenses were sold as singles and each pair was being sold for \$15. Brian provided me with information on how long to wear the lenses, how to store them and what saline solution to purchase. Brian advised me that they had recently sold out of a grey colored contact lenses and that the owner re-orders the lenses on a regular basis and I should return if I was interested in purchasing them. I purchased 2 single colored contact lenses which were removed from the glass case by Brian. I paid Brian with a \$20 dollar bill which was derived from the PBSO investigative fund. Brian placed the currency inside the store register and provided me a \$5 dollar bill in return. I exited the store concluding the contact lens sale. I returned to a pre-determined meeting location and met with FDA Special Agent [REDACTED] and turned over the 2 contact lens containers. Each container was labeled "Fresh Look Color Blends Grey Contact Lenses" Lot number 221261. The lenses were submitted for FDA lab analysis and SA Allen confirmed with the Fresh Look Manufacturer that the contact lenses purchased from Boost Mobile were counterfeit and were in fact a fraudulent medical device.</p> <p>On August 03, 2016, DOH Investigator [REDACTED] entered the Boost Mobile store in an undercover capacity and approached Wasem Kahook, who was standing behind the counter of the store. [REDACTED] began to ask Kahook about the colored contact lenses, showing interest in purchasing the for her daughter Kahook quoted a price of 15.00 for a pair of contact lenses. This action showed Kahook was aware of the items being sold in the retail store he owns and operates and is profiting from the illegal sales of the colored contact lenses.</p> <p>On September 27, 2106 the FDA Forensic Chemistry Center concluded that the contact lenses contained microbial contamination, specifically these organisms were identified as Pseudomonas Aeruginosa and Pseudomonas SP. These organisms can lead to aggressive eye infections if untreated.</p>							
A D M I N I S T R A T I V E	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Narrative Continued on Page 2						
Sworn [REDACTED] Signed [REDACTED]		Name of Officer (Please Print) [REDACTED] 10/14/16 Date					
Name of Notary Public / Clerk of Court / Officer (F.S.S 117.10) 10/14/16 Date		Name of Officer (Please Print) [REDACTED] 10/14/16 Date					

SCANNED
OCT 16 2016

Narrative (Continued)

On October 14, 2016 DOH Investigator [REDACTED] provided me with a Certificate of Non-Licensure for the Boost Mobile Store. In the State of Florida colored contact lenses are considered a medical device and it is unlawful to sell these devices without proper licensing and a licensed Optician on site for prescribing and dispensing. Kahook is not a licensed Optician and the Boost Mobile Store is not a licensed Optical Establishment

Due to the above investigation I find probable cause for the arrest of Waseem Kahook for following charges

Dispensing of Optical Devices with out a license pursuant F.S.S. 484.013 1c

Operating Optical Establishment w/o a permit F.S.S 484.013 (4).

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