

180F 4503

Rough Arrest Only

ARREST / NOTICE TO APPEAR Juvenile Referral Report

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

OBTS Number	Agency ORI Number FL0500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-18-115368
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	Weapon Seized/Type 1. Yes 2. No 2	
Location of Arrest (Including Name of Business) 3228 Gun Club Rd, WPB, FL 33406					
Date of Arrest 8-31-18	Time of Arrest 1540	Booking Date	Booking Time		

Name (Last, First, Middle) Parra, Juan, Pablo		Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex M	Date of Birth 12-27-75	Height 5'8	Weight 180
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) UK		Marital Status UK	Religion UK	Complexion Medium	Build Medium
Local Address (Street, Apt. Number) 10336 Fox Trail Rd South, Unit 1314		(City) West Palm Beach	(State) FL	(Zip) 33411	Phone (561) 907-2732
Permanent Address (Street, Apt. Number) Same As Above		(City)	(State)	(Zip)	Phone
Business Address (Street, Apt. Number) 4645 Gun Club Rd. #23		(City) West Palm Beach	(State) FL	(Zip) 33415	Phone (561) 681-5050
D/L Number, State P600-435-75-467-0		Soc. Sec. Number	INS Number	Place of Birth Venezuela	Citizenship Venezuela

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

<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
Released To: (Name)	Relationship	FCIC/NCIC
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 informed of any change of address: <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No: (Reason)		School Attended
		Grade

Recovery Information 0. N/A 1. Voluntary 2. Located Not Returned 3. Hospitalized 4. HRS Custody 5. Law Enforcement Custody 6. Returned to Parent 7. Deceased 8. Other										
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 Description Sexual Battery	Counts 01	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number 794.011(5)(b)	Violation of ORD #
Drug Activity N	Drug Type N	Amount/Unit N/A	Offense # 18-115368	Warrant/Capias Number
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number
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Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number

<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court	Location (Court, Room Number, Address)	
<input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instructions on reverse side.	Court Date and Time Month Day Year 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed

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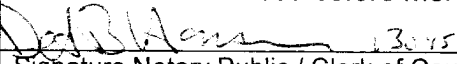
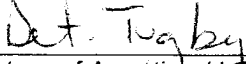
OBTS Number		PROBABLE CAUSE AFFIDAVIT			1	Juvenile
		1. Arrest : 2. N.T.A. 3. Request for Warrant 4. Request for Capias				
Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06-18-115368			
Charge Type: X 1. Felony 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many: <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other as apply.				Special Notes:		
Defendant's Name (Last, First, Middle) Parra, Juan, Pablo			Race W	Sex M	Date of Birth 12-27-75	
Charge Description Sexual Battery			Charge Description			
Charge Description			Charge Description			
Victim's Name (Last, First, Middle) [REDACTED]			Race W	Sex F	Date of Birth 11-11-84	
Victim's Local Address (Street, Apt. Number) (City) (State) (Zip) Phone			Address Source Verbal			
Victim's 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:						
<input type="checkbox"/> committed the below acts in my presence <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts <input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.						
On the _____ day of _____, 2015 at _____ <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest).						

NARRATIVE:

On 8-31-18 I was assigned to investigate allegations of sexual battery involving victim [REDACTED]

On 8-31-18 [REDACTED] reported a sexual battery to Palm Beach County Sheriff's Office (PBSO) Deputy Hernandez I.D. #6635. [REDACTED] told Deputy Hernandez she went to Massage Envy (11021 Southern Blvd. in Royal Palm Beach) in July 2017 for a massage. The massage therapist she usually went to was unavailable so Massage Envy booked her an appointment with Juan Parra. During the massage Juan fondled her breasts and put his fingers inside her vagina. [REDACTED] was in shock and did not talk to anyone about what happened until today. [REDACTED] provided a sworn written statement in addition to her verbal statement to Deputy Hernandez.

Based on the above information there is probable cause to believe Juan Parra, a person eighteen years of age or older, did commit sexual battery upon victim [REDACTED] a person eighteen years of age or older, without [REDACTED] consent, by putting his fingers inside the vagina of [REDACTED] and in the process thereof did not use physical force and violence likely to cause serious personal injury, contrary to Florida Statute 794.011(5)(b).

Sworn and Subscribed before me:	
	
Signature Notary Public / Clerk of Court / Officer	Signature of Arresting / Investigating Officer
Detective Brian Hansen #13045	Detective A. Tugby #6640
Name of Notary Public / Clerk of Court / Officer	Name of Officer (Please Print)
8-31-18	8-31-18
Date	Date