			Immo	WW74	<i>iGA</i> K	WS		\				
	OBTS Number		ARRES	ST / NOTI renile Re	ICE TO		R	1. Arrest 3. 2. N.T.A. 4.	Request for Request for		Juvenile	N
ĕ	Agency ORI Number FL 0 5 0 0 0 0 0	Agency Na						Agency Repo				
ADMINISTRATION	Charge Type:		Misdemeanor		5. Ordi			06- 21- 1 If Weapon Se	eized Enter T	уре П	Multiple	
NIN	Check as many as Apply. 2. Traffic For Location of Arrest (Including Name of Business)	elony 4.1	raffic Misdem		6. Othe	er Offense (Busin	are Name		I/A		clearance ndicator	01
8	2554151 51 All Col (Incidenting Harrie of Educations)							H BLVD	BOYNT	ON BEA	CH, FL	,334
l	Date of Arrest Time of A	rrest Booki	ng Date	Booking Time	•	Jail Date	JE	iil Time	Location	of Vehicle		
	Name (Last, First, Middle) MIELES CHRISTIAN	J.		Alias (Name, I			l		1			
	W - White I - American Indian B - Black O - Onental / Asian Scars, Marks, Tattoos, Unique Physical Features (Lock	05/30/198	- 1 1	Height 5'8		Veight 185	BROV	VN BRO	WN	FAIR Indication of:	MEDI	
JANT	UNKNOWN Local Address (Street, Apt. Number)	(City)	lion)	(Sta		S	INGLE	UNKN		Alcohol Influence Drug Influence Residence Ty	nce 🗌 🗐	
DEFENDANT	608 SEALOFT DR	BÔYN'	TON BEA	CH, FL,	33437	(Zip)	(9	954)770 - 5	963	1. City 3. F 2. County 4. C Address Soun	iorida Out of State	2
	Permanent Address (Street, Apt. Number) 608 SEALOFT DR		TON BEA				(9	954)770 - 5	963	Verbal /		/ DL
	Business Address (Street, Apt. Number) 6677 BOYNTON BEACH BLVD,	BOYNTON	BEACH, I	FL, 3343	nte) 7	(Zip)		none 561)264-3	389	Occupation PHYSIC	AL THE	RAP
	D/L Number, State M420110851900, FL	Soc. Sec	. Number		N/A		•	Place of Birt			tizenship SA	
CO-DEF	Co-Defendant Name (Last, First, Middle)			Race	e Sex	Date of Birth	-	□ 1. Ап □ 2. At		3. Felony 4. Misdemeand	5. Juve or	enile
8	Co-Defendant Name (Last, First, Middle)			Race		Date of Birth	4	☐ 1. Am ☐ 2. At I		3. Felony 4. Misdemeand		enile
	Parent Name (Last) Legal Custodian Other	(First)		(Middle	±)		V	× -		Residence	Phone	
	Address (Street, Apt. Number)		(0	City)		(State)		(Zip)		Business F	Phone	
JUVENILE	Notified by: (Name)			Date		Time		Juvenile Dispo 1. Handled/Propert. and I	rocessed wit Released	3. Incerd		
3	Released To: (Name)	Relationship		~ ()	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				Date	Tir	ne	
	The above address was provided by defendant and Court Clerk's Office (Phone 561-355-2526) informed of Yes, By: (Name)	any change of addr		ild and/or paren	nt was told to	keep the Juve	enile S	chool Attended	•	•	Grade	
	Property Crime? Description of Property Yes No		,	17				Value of Proper	ty .			
CODE	Drug Activity S. Sell R. Smuggle K. D	Distribute Pr	inufacture roduce/ uitivate	ŀ	Drug Type N. N/A A. Amphetar	B. Bart C. Coc mine E. Hero	eine	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Parapi Equip S. Synthe	ment Z	Unknown Other	
E S	Charge Description BATTERY	-		Counts 1	Domes	tic Violence		/iolation Number			ion of ORD#	
CHAR	Drug Activity Drug Type Amou	nt/Unit		Offense # 21-11479				Capias Number		Bond	· · ·	
\vdash	Charge Description	-		Counts	Domes	tic Violence	Statute \	/iolation Number		Viol	ation of ORD	#
CHARGE	Drug Activity Drug Type Amou	nt/Unit		Offense #	□Yes	No	Warrant	Capias Number		Bond		
Щ	Charge Description			Counts		tic Violence	Statute	/iołation Number		Viol	ation of ORD)#
CHARGE	Drug Activity Drug Type Amou	nt/Unit		Offense #	∐ Yes	s □No	Warrant	Capias Number		Bond		
Ж	Charge Description			Counts		tic Violence	Statute \	iolation Number		Violat	ion of ORD#	
CHARGE	Drug Activity Drug Type Amou	nt/Unit		Offense #	Lifes	i □No	Warrant	Capias Number		Bond		
Ä	Instruction No. 1 Mandatory Appearance in Court	Location (Court, F	Room Number. A	Address)					是图	是	77	
PPE	Instruction No. 2 You need not appear in Court but must	Court Date and T	ime							<u>, 5</u>	-	
0	Comply with instruction on reverse side. I AGREE TO APPEAR AT THE TIME AND PLACE DE	Month SIGNATED TO ANS	WER THE OFF	Day ENSE CHARG	SED OR TO	Yea	FSUBSCR	Time IBED. I UNDERS	TANO TYPA	SHOWEDIW	ILLEULDAF	J P.M. AIL TO
NOTICE TO APPEAR	APPEAR BEFORE THE COURT AS REQUIRED BY T	HIS NUTICE TO AF	PPEAR, IHATT	MAT BE HELL	INCONIE	MPT OF COU	RIANDA	WARRANT FOR	SCI	SHALL BE IS	SULDE	l.
Ž	Signature of De HOLD for other Agency	fendant (or Juvenile	and Parent/Cus		/			ame Verification (Eat Sign	ed		1
_	Name:		K	ily !	/			RINT)	27	ing Cu		
ADMIN	☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:		e of Arresting C S K. GAR			36798			7	头	Pag	ge
	Intake Deputy I.D. #	Pouch # Tran	S K. GAR		36798	Agency PBS(y W	itness here if sub gned with an "X".	ject		1 0	_

								(40)						
	OBTS Number		PROBA _{® 4} É CAUSE A	FFIDAVIT			1 Arrest 2 NTA		uest for Warrar uest for Capias		1	Juven	ile	1
	Agency ORI Number 7	Agency Name	each County Sh	oriffo Offic	<u> </u>	Agency	Report Number	വട	- 21-11	14707	<u>_</u>			
	Charge Type 1 Felony	raiiii be	3 Misdemeanor	ieilii s Oilik	5 Ordinance	Spe	cial Notes	- 00 -		14/3/				\dashv
_	Check all that Apply2 Traffic Felor Name (Last, First, Middle)	ny	4 Traffic Misdemeans		6 Other			Race	Sex	Date of B	irth			↲
		RISTIAN	J.	Alia	16			W	M	05/30		35		
	Charge Description BATTERY				Charge Descripti	on			•					\neg
	Charge Description				Charge Descripti	on								
	Victim's Name (Last, First, Middle)						Т	Race	Sex	Date of B	Jirth			-
	Local Address (Street, Apt Number)	ALLIS	SON (City)	DAN (State)	IIELA (Zip)	hone		W	F Address So	11/11	/200	02		_
	3254 W Cat Cay Rd	,	LAKE WÖRTH				3-5074		DL/ DA		/EF	RBAL		
	Business Address (Name, Street)		(City)	(State)	(Zip)	hone			Occupation				-	
	The undersigned certifies and swears that he The Person taken into custody	e/she has just and r	easonable grounds to believe	and does believe tha	at the above named	Defendant c	ommitted the foll	owing violation	n of law.					\dashv
	Committed the below acts in my present	e.	☐ Was	observed by		Who	told		That he	she saw the	arrestu	ed person commit the b	elow acts.	
	Confessed to	Admitting the b	elow facts 🔳 Was	found to have commit	tted the below acts.	resulting from	n my (described)	investigation	- (- 7				
<u> </u>	On The 5TH Day Of OC	TOBER	20 21	At 18:30		A.M.	■ P. M .		_	\cup				_
	n October 7, 2021, I re													
	eference to a battery in leach, FL, 33437 (Hand										acr	ı Bıva, Boy	nton	
	•			•	•	-								ł
	Soto stated the following, on Tuesday, October 5, 2021, at 1700 hours she arrived at Hand & Stone Massage and Facial Spa for her massage appointment. She met with Christian, who advised he was going to do her massage. When													
	ney went to the room,											_		- 1
s	he wanted him to avoi	d and sh	e stated her gl	utes.		~								
Н	le began to massage h	ner back a	and later begar	n to massa	age her g	utes a	rea abo	ve the	drape	that w	as	used to co	ver	
tł	nat area. Soto advised	he later a	asked, "that st	it feels go	od, don't	it?" S	he repli	ied yes	s, think	ing he	wa	s talking a	bout	
	ne back massage and ack. She advised she													1
	over by her vagina are	_				-						•		s
	ands spread her thigh						_					•	ınd	
	uickly closed her legs hould have left but de												ation	۱. I
should have left but described her feeling as nervous, scared, and just shocked. She stated there was no penetration. After the massage, she advised she went to the bathroom and noticed her underwear pushed to the side.														
	At approximately 2235 hours, Deputy K. Noel ID# 7660, conducted a photo lineup in which Soto reviewed and													
positively identified the defendant in this case, Christian Mieles. The photo was signed, initialed, and dated by Soto.														
T	The signed photo array was submitted into evidence.													
ŀ	met and spoke with th	e defend	ant. Christian	Mieles. on	October	12. 20	21. Miel	es was	s read i	nis Mir	anc	da rights.		
a	dvised he understood	and was	willing to coo	perate. He	advised	she w	ent in fo	or a ful	body	massa	ıge.	I question	ed	
	im if she was ever ask voided. I asked Mieles												to	
	nassage that area. I ad													d
ti	nat he did not believe t	that he gi	razed that area	. He advis	ed if he c	id tou	ch that	area, i	t was a	mista	ke.	He stated	he di	d
h	ear her say stop when top the massage. No v	n he mass video sum	aged the thigh	i area, sai: Inesses	d sorry, a	nd co	ntinued	to mas	ssage I	ner. St	ie d	lid not ask	him t	to
	-													
	Based on the above fact 84.03(1a1).	cts, I foun	d Probable Ca	use exists	s to arres	t Chris	stian Mi	eles fo	r Batte	ry pur	sua	nt to FSS.		

The foregoing instrument was swom to and affirmed before me CPL. R. RODRIGUEZ#13919 Name of Notary Public / Clerk of Court / Officer (F.S.S. Signature of Notary Public / Clerk of Sout / Officer (F.S.S.	117.00)	OCTOBER D/S K. GARCI Name of Arresting/Inve	estigative Officer
		<i></i>	
	; ;		CO
		R. I. I.	
		,	
OIL			