

0515348

NR

20CF 2225MB
1295

Rough Arrest Only

ADMINISTRATION		ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest <input checked="" type="checkbox"/> 3. Request for Warrant <input type="checkbox"/> 2. N.T.A. <input type="checkbox"/> 4. Request for Capias <input type="checkbox"/>		1 <input type="checkbox"/> Juvenile <input checked="" type="checkbox"/> N			
OBT Number		Agency ORI Number FL0500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-19-250148					
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 <input type="checkbox"/> 2			
Location of Arrest (Including Name of Business) 22042 Boca Place Drive #8112 - Boca Raton, FL 33433		Location of Offense (Business Name, Address) 22042 Boca Place Drive #8112 - Boca Raton, FL 33433									
Date of Arrest 03.06.2020		Time of Arrest 1745		Booking Date		Booking Time		Location of Vehicle			
Name (Last, First, Middle) Ewart, Kyle Scott		Alias (Name, DOB, Soc. Sec. #, Etc.)									
Race W - White B - Black		Sex W M		Date of Birth 06.12.1995		Height 5'06"		Weight 135			
Eye Color Blue		Hair Color Bro		Complexion Med		Build Med		Indication of: Alcohol Influence <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Left arm - "E"		Marital Status S		Religion Protestant		Residence Type 1. City 3. Florida 2. County 4. Out of State <input checked="" type="checkbox"/> 2		Address Source FLDL			
Local Address (Street, Apt. Number) 22042 Boca Place Drive #8112		(City) Boca Raton		(State) FL		(Zip) 33433		Phone (816) 809-7058			
Permanent Address (Street, Apt. Number) Same as above		(City)		(State)		(Zip)		Phone ()			
Business Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone ()			
D/L Number, State E630-517-96-212-0		Soc. Sec. Number		INS Number		Place of Birth Peculiar, MO		Citizenship US			
Co-Defendant Name (Last, First, Middle) N/A		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor			
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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor			
<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)		Relationship		Time		Juvenile Disposition 1. Handled/Processed within Dept. and Released 2. TOT HRS/CYF 3. Incarcerated					
Released To: (Name)		Relationship		FCIC/NCIC		Date		Time			
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 S. Sell R. Smuggle K. Dispense/ Distribute M. Manufacture Z. Other N. N/A B. Buy D. Deliver P. Possess T. Traffic E. Use		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/deriv. S. Synthetic		P. Paraphernalia/ Equipment Z. Other	
Charge Description Possession of Sexual Performance by a Child		Counts 10		Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Statute Violation Number 827.071(6)		Violation of ORD # 3003			
Drug Activity N		Drug Type N		Amount/Unit		Offense # 19-250148		Warrant/Capias Number			
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Yes <input checked="" 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 checked="" 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 checked="" type="checkbox"/> No		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number			
<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court <input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instructions on reverse side.		Location (Court, Room Number, Address)									
		Court Date and Time Month Day Year Time P.M.									
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: <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) DET. Tereza Grimaldi		I.D. # #24094		Name Verification (Printed by Arrestee) (PRINT)					
Intake Deputy WAG TOMMIE 8099		Pouch #		Transporting Officer DS Groves 8057		Agency PBSO		PAGE 1 of 1			

DISTRIBUTION: 1st WHITE - SOURCE 2nd WHITE - RECORDS GREEN - STATE ATTY. YELLOW - CID PINK - JAIL (Rough Arrest) GOLD - DEFENDANT (Med.) or BLOTTER (Felony)

MARK 07 2020

OBTS Number		PROBABLE CAUSE AFFIDAVIT				1	N
		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias					Juvenile
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06 -19-250148		
Charge Type: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 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) Ewart, Kyle Scott					Race W	Sex M	Date of Birth 06.12.1995
Charge Description SEXUAL PERFORMANCE OF MINOR - POSSESSION				Charge Description			
Charge Description				Charge Description			
Victim's Name (Last, First, Middle) STATE OF FLORIDA					Race	Sex	Date of Birth
Victim's Local Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone	Address Source
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 checked="" type="checkbox"/> confessed to <u>Det. Grimaldi</u> admitting to the below facts.		<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.					
On the 6 th of March 2020 at 5:45 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest).							

NARRATIVE:

I am part of a National Task Force known as the South Florida Internet Crimes Against Children (ICAC). This task force investigates internet crimes against children, child exploitation, and related cases.

On October 1, 2019, I was assigned to further investigate Cyber Tip #53542614 received from the National Center of Missing and Exploited Children (NCMEC). Cyber Tips are investigative leads generated by the National Center of Missing and Exploited Children (NCMEC) in the prevention of abducted, endangered, and sexually exploited children. NCMEC works with law enforcement, Internet Service Providers, electronic payment service providers, and others to reduce the distribution of child sexual exploitation images and videos over the Internet.

On August 12, 2019, Dropbox reported an unknown user using the email address of petemitchell45@protonmail.com and screen name of Pete Mitchell had uploaded 4 images which depicted the sexual performance of minors. Dropbox is an online "offsite" storage medium for data that can be accessed and viewed at any time from any computer or electronic storage device capable of accessing the internet.

On October 8, 2019, a subpoena was served to Comcast to obtain basic subscriber information for the IP (internet protocol) address that was used to upload the files to Dropbox (2601:58c:c000:480:c1c0:4079:f7b9:78d). Comcast returned subpoena results which indicated that the subscriber for suspect IP address was reported to be Kyle Ewart located at 22042 Boca Place Drive Apartment 8112 in unincorporated Boca Raton, FL (Palm Beach County). The Comcast account was still active and the phone number listed on the account was 816-809-7058.

Detective Grimaldi reviewed the images provided my Dropbox and confirmed (1) image to meet the elements of child pornography as defined by Florida State Statue. The image depicted a prepubescent naked female estimated to be approximately 9-11 years of age in various sexual poses.



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NARRATIVE CONTINUATION

On March 6, 2020, Detective Grimaldi made contact with Kyle Ewart for the purposes of conducting a recorded interview. Post Miranda Ewart confessed to being interested in child pornography for approximately 1 year. Ewart viewed child pornography as much as 2 weeks ago. Ewart knew that what he was doing was illegal and admitted that he had a problem he couldn't control and needed help for. He admitted to sexually pleasuring himself while viewing the photos. Ewart provided written and recorded consent to search his phone. The Dropbox application as well as Photo Vault and Mega were located. All 3 accounts are used for cloud storage. Detective Grimaldi viewed more than 10 photos depicting young prepubescent naked females in different sexual positions. The minor children ranged in age from approximately 7 or 8 years of age up to puberty.

Based on my investigation and evidence gathered, I find probable cause that Kyle Ewart did knowingly possess and intentionally view sexual conduct by a child in violation of F.S.S. 827.071(5). Ewart was placed under arrest and transported to the Palm Beach County Main Jail.

Sworn and Subscribed before me: 	
Signature Notary Public / Clerk of Court / Officer D/S M. D'Avanzo	Signature of Arresting / Investigating Officer Det. Teresa Grimaldi ID #24094
Name of Notary Public / Clerk of Court / Officer	Name of Officer (Please Print)
March 6, 2020	March 6, 2020
Date	Date

SCANNED
MAR 07 2020



**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	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	3
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020007567	Date: 03/07/2020
	Specialist Name/ID: T Howard/7185

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