



1100175898

OBTS NUMBER	ARMED FORCES NO	BWC NO	COMPLAINT/ARREST AFFIDAVIT			POLICE CASE NO. 2300884
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SPECIAL OPERATION:	<input checked="" type="checkbox"/> FELONY <input type="checkbox"/> WARRANT	<input checked="" type="checkbox"/> MISD	<input type="checkbox"/> TRAFFIC	<input type="checkbox"/> JUV	<input type="checkbox"/> DV	<input type="checkbox"/> MOVES	<input type="checkbox"/> CIV INF	JAIL NO. 230121792	PMHD NO	COURT CASE NO. F23001010
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IDS NO.	AGENCY CODE 098	MUNICIPAL P.D. DEF. ID NO.	MDPD RECORDS AND ID NO.	STUDENT ID NO.	GANG RELATED NO	FRAUD RELATED NO
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DEFENDANT'S NAME (LAST, FIRST, MIDDLE) RAMIREZ, ALEXANDRA PAULINE	ALIAS and / or STREET NAME	SIGNAL:
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DOB (MM/DD/YYYY) 10/28/1994	AGE 28	RACE W	SEX F	HISPANIC: YES ETHNICITY: UNK	HEIGHT 5'02	WEIGHT 120	HAIR COLOR RED	HAIR LENGTH LNG	HAIR STYLE STR	EYES BRO	GLASSES NO	FACIAL HAIR CLN	TEETH NOR
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SCARS, TATTOOS, UNIQUE PHYSICAL FEATURES (Location, Type, Description) TATTOO: TATTOO NECK,	PLACE OF BIRTH (City, State/Country) MIAMI FL US
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LOCAL ADDRESS	PHONE	CITIZENSHIP US
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PERMANENT ADDRESS (Street, Apt. Number) 859 NW 69 ST	(City) MIAMI	(State) FL	(Country) US	(Zip) 33150	PHONE (786) 582-7055	OCCUPATION MANAGER
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SCHOOL OR BUSINESS ADDRESS (Street, Apt. Number)	(City)	(State)	(Country)	(Zip)	PHONE	ADDRESS SOURCE DL
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DRIVER'S LICENSE NUMBER/STATE FL-R562015848881	SOCIAL SECURITY NO. XXX-XX-XXXX	WEAPON SEIZED NO	Defendant/CONCEALED WEAPON PERMIT NONE	INDICATION OF: Alcohol Intuence: N Drug Intuence: U
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ARREST DATE 01/15/2023	ARREST TIME 12:30	ARREST LOCATION EVERGLADES CORRECTIONAL INSTITUTION 1599 SW 187 AV MIAMI, FL 33196	GRID
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CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE	<input type="checkbox"/> FELONY <input type="checkbox"/> DV	<input type="checkbox"/> JUVENILE <input type="checkbox"/> MISDEMEANOR
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CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE	<input type="checkbox"/> FELONY <input type="checkbox"/> DV	<input type="checkbox"/> JUVENILE <input type="checkbox"/> MISDEMEANOR
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CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE	<input type="checkbox"/> FELONY <input type="checkbox"/> DV	<input type="checkbox"/> JUVENILE <input type="checkbox"/> MISDEMEANOR
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JUV only	Relation	Name	Street	Zip	Phone	Contacted?
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CHARGES	CHARGE AS:	CNTS	FL STATUTE NUMBER	VIOL OF SECT.	CODE OF	UCR	DV	WARRANT TYPE OR TRAFFIC CITATION
1. F/3-COCAINE/POSSESSION:COCAINE	F.S.	1	893.13(6)(A)			0011350A	N	
2. F/3-CONTROLLED SUBSTANCE/POSSESSION:XANAX	F.S.	1	893.13(6)(A)			0011350A	N	
3. M/1-CANNABIS/POSSESSION/20 GRAMS OR LESS:CANNABIS	F.S.	1	893.13(6)(B)			0011350A	N	
4.								

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:
On the 15 day of JANUARY, 2023, at 09:48 at (EVERGLADES CORRECTIONAL INSTITUTION) 1599 SW 187 AV. MIAMI, FL, 33196

YOUR AFFIANT, INSPECTOR MANUEL MEDINA, IS A SWORN LAW ENFORCEMENT OFFICER OF THE OFFICE OF THE INSPECTOR GENERAL, FLORIDA DEPARTMENT OF CORRECTIONS.

ON JANUARY 15, 2022, AT EVERGLADES CORRECTIONAL INSTITUTION (EVERGLADES CI), MIAMI-DADE COUNTY, FL, ALEXANDRA RAMIREZ (DEFENDANT) VIOLATED FLORIDA STATUTE 893.13 (6)(A), POSSESSION OF NARCOTICS, AND FLORIDA STATUTE 893.13 (6)(B), MARIJUANA UNDER (20) GRAMS, WHILE ON DEPARTMENT'S... [Continued on Next Page]

HOLD FOR OTHER AGENCY VERIFIED BY	<input type="checkbox"/> HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing).	<input type="checkbox"/> 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. Furthermore, I agree that notice concerning the time, date and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juveniles notify Juvenile Division) anytime that my address changes. <input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof.	
I SWEAR THAT THE ABOVE STATEMENT IS TRUE AND CORRECT. MEDINA, M: Court ID: 098-████	SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED AUTHORITY THIS 15 DAY OF JANUARY, 2023 NICHOLAS, R: Court ID: 098-████		

COMPLAINT/ARREST AFFIDAVIT - COURT COPY



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OBTS NUMBER	COMPLAINT/ARREST AFFIDAVIT CONTINUATION	POLICE CASE NO. 2300884
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JAIL NO. 230121792	COURT CASE NO. F23001010
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SPECIAL OPERATION:	<input checked="" type="checkbox"/> FELONY <input type="checkbox"/> WARRANT	<input checked="" type="checkbox"/> MISD <input type="checkbox"/> FUGITIVE WARRANT:	<input type="checkbox"/> TRAFFIC <input type="checkbox"/> JUV <input type="checkbox"/> DV <input type="checkbox"/> MOVES <input type="checkbox"/> In State	<input type="checkbox"/> CIV INF <input type="checkbox"/> Out State	JAIL NO. 230121792	PMHD NO	COURT CASE NO. F23001010
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DEFENDANT'S NAME (LAST, FIRST, MIDDLE) RAMIREZ, ALEXANDRA PAULINE	DOB (MM/DD/YYYY) 10/28/1994
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CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE	<input type="checkbox"/> FELONY <input type="checkbox"/> DV	<input type="checkbox"/> JUVENILE <input type="checkbox"/> MISDEMEANOR
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CHARGES	CHARGE AS:	CNTS	FL STATUTE NUMBER	VIOL OF SECT.	CODE OF	UCR	DV	WARRANT TYPE OR TRAFFIC CITATION
5.								
6.								
7.								
8.								

PROPERTY AT EVERGLADES CI.

DURING A CONTRABAND INTRODUCTION OPERATION, WITH THE DEPARTMENT'S CANINE INTRODUCTION UNIT, A CERTIFIED CANINE ALERTED TO THE PRESENCE OF THE ODOR OF NARCOTICS WHICH EMANATED FROM A GREY CHRYSLER TOWN & COUNTRY VAN, BEARING FL LICENSE PLATE NUMBER 91BQMZ. AFTER THE ALERT, THE DEFENDANT WAS ESCORTED OUT OF THE FACILITY.

UPON THE DEFENDANT'S EXIT FROM THE INSTITUTION, YOUR AFFIANT APPROACHED THE DEFENDANT AND SECURED WRITTEN CONSENT TO SEARCH HER VEHICLE IN THE INSTITUTION'S PARKING LOT. DURING THE CONSENSUAL ENCOUNTER, THE DEFENDANT STATED [REDACTED]. SENIOR INSPECTOR KEVIN PATTERSON AND CANINE INTRODUCTION UNIT CAPTAINS ROBERT RUIZ AND OTTO COUTO SEARCHED THE VEHICLE. DURING THE SEARCH, (11.8) GRAMS OF MARIJUANA (TOTAL PACKAGE WEIGHT), (1.6) GRAMS OF COCAINE, A XANAX PILL WITHOUT PRESCRIPTION, A MARIJUANA GRINDER WITH RESIDUE, AND A NON-LABELED PILL BOTTLE WITH POWDER RESIDUE WAS LOCATED IN A BLACK BOOKBAG BETWEEN THE DRIVER AND PASSENGER SEAT. THE PRESUMPTIVE NARCOTIC FIELD TESTS USED RESULTED IN POSITIVE RESULTS FOR THE AFOREMENTIONED DRUG CONTRABAND.



DURING A POST-MIRANDA STATEMENT, THE DEFENDANT STATED THE FOLLOWING: THE DEFENDANT ADMITTED [REDACTED]. SHE DENIED SHE INTENDED TO INTRODUCE DRUG CONTRABAND ONTO EVERGLADES CORRECTIONAL INSTITUTION. SHE [REDACTED].

YOUR AFFIANT RESPECTFULLY SUBMITS THAT PROBABLE CAUSE HAS BEEN ESTABLISHED THAT THE DEFENDANT (ALEXANDRA RAMIREZ) DID COMMIT THE CRIMINAL VIOLATIONS ENUMERATED ABOVE.

SURVEILLANCE VIDEO, WITNESS STATEMENTS, AND INVESTIGATIVE MATERIALS WILL BE AVAILABLE FOR REVIEW.

SAO PRE-FILE CONFERENCE INFORMATION

DATE:
TIME: 0000
CONTACT:
NOTES: TO BE SET FOR REVIEW

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I SWEAR THAT THE ABOVE STATEMENT IS TRUE AND CORRECT.  MEDINA, M: Court ID: 098- [REDACTED]	SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED AUTHORITY THIS 15 DAY OF JANUARY, 2023  NICHOLAS, R: Court ID: 098- [REDACTED]	<input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof.

COMPLAINT/ARREST AFFIDAVIT CONT.

Transporting Officer(s)

¹ MEDINA, MANUEL

ID# [REDACTED]

Dept#:098

Taken To:TGK

² PATTERSON, KEVIN

ID# [REDACTED]

Dept#:098/00098

Taken To:TGK

Does defendant have any signs/complains of injury? NO

Defendants Vehicle

YEAR	MAKE	MODEL	TAG	STATE	VIN	COLOR
2005	CHRY	4D TOWN AND COUNTRY	91BQMZ	FL	1C4GP45R75B178461	GRY

OWNER/DESIGNEE RELEASE FORM & DISCLAIMER OF LIABILITY

Owner/Driver/Designee (O/D/D must read and sign disclaimer of liability if vehicle is left at scene, or removed, or released to O/D/D at scene.

Released To: _____ (Print Name-Signature)

Drivers Lic: _____ State _____

Left on Scene? YES

The undersigned certifies that he/she is the legal owner/driver/designee of the vehicle described above. In consideration of being permitted to leave the vehicle mentioned at the location, or removed, or released, the undersigned hereby releases and discharges Miami-Dade County and all of its agents and employees for any damage to, or damage caused, theft of, or theft from, the vehicle described above.

Signature of Owner/Driver/Designee: _____

Signature of Officer Witnessing: _____ ID# _____ (Print Name-Signature)

IF YOUR VEHICLE IS PARKED MORE THAN 48 HOURS, IT IS SUBJECT TO BE REMOVED