

ARREST/NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	3	Juvenile	No
OBTS NUMBER		Agency ORI Number <b>FL0501700</b>		Agency Name <b>Jupiter Police Department</b>		Agency Report Number <b>54-19-000820</b>
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapons Seized/Type 1. Yes 2. No <b>2</b>				
Location of Arrest (Including Name of Business)			Location of Offense (Business Name/Address) <b>Orchids of Asia Day Spa 103 S US Hwy 1 C2, Jup.</b>		Date of Offense <b>01/20/19</b>	
Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Fingerprinted By: <input type="checkbox"/> Identification <input type="checkbox"/> AFIS <input type="checkbox"/> Criminal
Location of Vehicle		Other Local Number	FDLE Number	DOC Number	FBI Number	
Name (Last, First Middle) <b>Kraft, Robert</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)		
Race W - White B - Black	Sex <b>M</b>	Date of Birth <b>06/05/1941</b>	Height <b>508</b>	Weight <b>160</b>	Eye Color <b>blu</b>	Hair Color <b>gray</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>none visible</b>		Marital Status <b>unk</b>	Religion <b>unk</b>	Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Un. Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Local Address (Street, Apt. Number) <b>260 Heath Street</b>		(City) <b>Brookline</b>	(State) <b>Ma</b>	(Zip) <b>02445</b>	Phone <b>( )</b>	Residence Type: 1. City 3. Florida 2. County 4. Out of State
Permanent Address (Street, Apt. Number) <b>same</b>		(City)	(State)	(Zip)	Phone <b>( )</b>	Address Source
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone <b>( )</b>	Occupation
D/L Number	D/L State	Soc. Sec. Number	INS Number	Place of Birth <b>MA</b>		Citizenship <b>US</b>
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"/> 1. Parent <input type="checkbox"/> 2. Legal Custodian <input type="checkbox"/> 3. Other		Name (Last, First, Middle)			Residence Phone <b>( )</b>	
Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone <b>( )</b>	
Notified By: (Name)		Date	Time	Juvenile Disposition 1. Handled/Processed within Dept. and Released 2. TOT HRS/DCF 3. Incarcerated		
Released To: (Name)		Relationship		Date	Time	
The above address was provided by the defendant and/or defendant's parent/guardian. The child and/or parent/guardian was told to keep the Juvenile Division Office (Phone 561-355-7200) 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	
Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/Distribute Distribute	M. Manufacture Produce/ Cultivate	Z. Other
Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other	
Charge Description <b>Solicit another to commit prostitution</b>		Counts <b>1</b>	<input checked="" type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number <b>796.07(5)(a)1</b>		Violation of ORD #
Activity <b>N</b>	Drug Type <b>N</b>	Amount/Unit <b>N/A</b>	Offense # <b>19-000820</b>	Warrant/Capias Number		Bond
Charge Description		Counts	<input type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number		Violation of ORD #
Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond
Charge Description		Counts	<input type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number		Violation of ORD #
Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond
Charge Description		Counts	<input type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number		Violation of ORD #
Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond
<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address) <b>North County Courthouse, 3188 PGA Blvd., Palm Beach Gardens, FL 33410</b>				
		Court Date and Time Month _____ Day _____ Year _____ Time _____ <input type="checkbox"/> A.M. <input type="checkbox"/> 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:		Signature of Arresting Officer <b>X</b>		Name Verification (Printed by Prisoner) (PRINT)		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal Intake Deputy		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other: I.D.#		Name of Arresting Officer (Print) <b>Det. A. Sharp #412/1101</b>		I.D.#
Pouch #		Transporting Officer		I.D.#		Agency
				Witness here if subject signed with an "X"		
						PAGE <b>1 OF 1</b>

DISTRIBUTION: COURT - 1 COPY STATE ATTORNEY - 1 COPY AGENCY - 2 COPIES DEFENDANT - 1 COPY

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	No
ADMIN	OBTS Number	Agency Name		Agency Report Number				
	Agency ORI Number <b>FL0501700</b>	<b>JUPITER POLICE DEPARTMENT</b>		<b>54-19-000820</b>				
Charge Type:		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:				
DEF	Name (Last, First, Middle)			Alias				
	Kraft, Robert, K.							
VICTIM	Victim's Name (Last, First, Middle)			Race	Sex	Date of Birth		
	State of Florida							
	Local Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone	Address Source
210 Military Trail, Jupiter, Florida 33458						(561) 746-6201		
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone	Occupation	
						( )		
PROBABLE CAUSE STATEMENT	The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe 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.					
On the <u>20th</u> day of <u>January</u> , <u>2019</u> at <u>1059</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest)								

In October of 2018 members of the Jupiter Police Department began an investigation into criminal activity occurring at Orchids of Asia Day Spa, located at 103 S. US Highway 1 C2 in Jupiter. On January 17, 2019, covert surveillance equipment was installed in Orchids of Asia Day Spa pursuant to a sneak and peek warrant. The following narrative is a description of the illicit activity that took place.

Room Surveillance: Det. D. Hirsch #402  
Room Camera # JPPD Cam 2

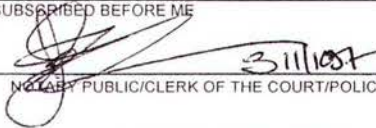
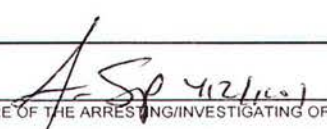
January 20<sup>th</sup>, 2019, 1059hrs – 1113hrs

Defendant: Robert K. Kraft (W/M, 06/05/41), dark long sleeved shirt, blue baseball cap, blue shorts, FL# 9191 (passenger).

On Sunday, January 20<sup>th</sup>, 2019, video surveillance was conducted at the target business. At approximately 1059 hrs, Kraft entered the business through the front door where he paid cash at the front desk to an Asian female, previously identified as [REDACTED] which was captured on JPPD Cam 5. [REDACTED] escorted Kraft to a room identified as JPPD Cam 2. There, the two hugged each other and Kraft took off all of clothing, laid face up on the massage table and [REDACTED] hugged him again. At approximately 1102hrs, [REDACTED] began manipulating Kraft's penis and testicles and then put her head down by his penis. This went on for several minutes. After a few minutes, [REDACTED] wiped Kraft in the area of his genitals with a white towel, helped him get dressed and hugged him again. Kraft gave [REDACTED] a \$100 bill plus at least one other unidentifiable bill. Kraft left the room at approximately 1113hrs.

Surveillance on scene: At approximately 1059hrs, a white male, previously identified as Robert Kraft (W/M 06/05/41) entered the establishment through the front door. At approximately 1113hrs, the Kraft exited the front door and traveled to a vehicle waiting in the parking lot, a 2015 blue Bentley FL Tag 9191; this was observed by Detective C. Cook #404. Kraft had previously entered the business on January 19<sup>th</sup>, 2019 and was positively identified by Massachusetts driver's license.

Based on the aforementioned investigation, I have probable cause to believe Robert K. Kraft did solicit, induce, entice, or procure another to commit prostitution, lewdness, or assignation, contrary to Florida Statute 796.07(5)(a)1.

ADMIN.	SWORN AND SUBSCRIBED BEFORE ME	
	 _____ NOTARY PUBLIC/CLERK OF THE COURT/POLICE OFFICER	 _____ SIGNATURE OF THE ARRESTING/INVESTIGATING OFFICER
	<b>February 22, 2019</b> DATE	<b>Det. A. Sharp #412</b> NAME OF OFFICER (PLEASE PRINT)
		<b>February 22, 2019</b> DATE

DISTRIBUTION: COURT – 1 COPY STATE ATTORNEY – 1 COPY AGENCY – 3 COPIES

ARREST/NOTICE TO APPEAR  
Juvenile Referral Report

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

3

Juvenile

No

ADMINISTRATIVE	OBTS NUMBER		Agency ORI Number <b>FL0501700</b>		Agency Name <b>Jupiter Police Department</b>		Agency Report Number <b>54-19-000819</b>	
	Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other						Weapons Seized/Type 1. Yes <input type="checkbox"/> 2. No <input checked="" type="checkbox"/>	
	Location of Arrest (Including Name of Business)				Location of Offense (Business Name/Address) <b>Orchids of Asia Day Spa 103 S US Hwy 1 C2, Jup.</b>			Date of Offense <b>01/19/19</b>
	Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Fingerprinted By: <input type="checkbox"/> Identification <input type="checkbox"/> AFIS <input type="checkbox"/> Criminal	
Location of Vehicle			Other Local Number	FDLE Number	DOC Number	FBI Number		
DEFENDANT	Name (Last, First Middle) <b>Kraft, Robert</b>						Alias (Name, DOB, Soc. Sec. #, Etc.)	
	Race W - White I - American Indian B - Black O - Oriental/Asian	Sex <b>M</b>	Date of Birth <b>06/05/1941</b>	Height <b>508</b>	Weight <b>160</b>	Eye Color <b>blu</b>	Hair Color <b>gray</b>	Complexion <b>med</b>
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>none visable</b>			Marital Status <b>unk</b>	Religion <b>unk</b>	Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Un. Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		
	Local Address (Street, Apt. Number) <b>260 Heath Street</b>		(City) <b>Brookline</b>	(State) <b>Ma</b>	(Zip) <b>02445</b>	Phone <b>( )</b>	Residence Type: 1. City 3. Florida 2. County 4. Out of State	
	Permanent Address (Street, Apt. Number) <b>same</b>		(City)	(State)	(Zip)	Phone <b>( )</b>	Address Source	
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone <b>( )</b>	Occupation	
	D/I Number	D/I State	Soc. Sec. Number	INS Number	Place of Birth <b>MA</b>		Citizenship <b>US</b>	
CO-DEF.	Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth		
	Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth		
JUVENILE	<input type="checkbox"/> 1. Parent <input type="checkbox"/> 2. Legal Custodian <input type="checkbox"/> 3. Other		Name (Last, First, Middle)			Residence Phone <b>( )</b>		
	Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone <b>( )</b>		
	Notified By: (Name)		Date	Time	Juvenile Disposition 1. Handled/Processed within Dept. and Released 2. TOT HRS/DCF 3. Incarcerated			
	Released To: (Name)		Relationship		Date	Time		
	The above address was provided by the defendant and/or defendant's parent/guardian. The child and/or parent/guardian was told to keep the Juvenile Division Office (Phone 561-355-7200) informed of any change of address. Yes, by: (Name) No: (Reason)				School Attended		Grade	
CODE	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No			Description of Property			Value of Property	
	Activity S. Sell N. N/A P. Possess	S. Sell B. Buy D. Deliver E. Use	R. Smuggle K. Dispense/Distribute Distribute	K. Dispense/Distribute M. Manufacture Produce/ Cultivate	M. Manufacture Z. Other Produce/ Cultivate	Z. Other	Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin
CHARGE	Charge Description <b>Solicit another to commit prostitution</b>		Counts <b>1</b>	<input checked="" type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number <b>796.07(5)(a)1</b>		Violation of ORD #	
	Activity <b>N</b>	Drug Type <b>N</b>	Amount/Unit <b>N/A</b>	Offense # <b>19-000819</b>	Warrant/Capias Number		Bond	
CHARGE	Charge Description		Counts	<input type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number		Violation of ORD #	
	Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond	
CHARGE	Charge Description		Counts	<input type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number		Violation of ORD #	
	Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond	
CHARGE	Charge Description		Counts	<input type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number		Violation of ORD #	
	Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond	
NOTICE TO APPEAR	<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address) <b>North County Courthouse, 3188 PGA Blvd., Palm Beach Gardens, FL 33410</b>					
			Court Date and Time Month _____ Day _____ Year _____ Time _____ <input type="checkbox"/> A.M. <input type="checkbox"/> 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		
ADMIN	HOLD for other Agency Name:			Signature of Arresting Officer <b>x [Signature]</b>		Name Verification (Printed by Prisoner) (PRINT)		
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest			Name of Arresting Officer (Print) <b>Det. A. Sharp #412/1101</b>		I.D.#		
	<input type="checkbox"/> Suicidal <input type="checkbox"/> Other:			Intake Deputy I.D.#		Pouch #		
			Transporting Officer I.D.#		Agency			
Witness here if subject signed with an "X"						PAGE <b>1 of 1</b>		

PROBABLE CAUSE AFFIDAVIT

1. Arrest  
2. N.T.A.

3. Request for Warrant  
4. Request for Capias

3

Juvenile

No

ADMIN

OBTS Number

Agency ORI Number  
**FL 0501700**

Agency Name  
**JUPITER POLICE DEPARTMENT**

Agency Report Number  
**54 - 19 - 000819**

Charge Type:  1. Felony  3. Misdemeanor  5. Ordinance  
Check as many as apply.  2. Traffic Felony  4. Traffic Misdemeanor  6. Other

Special Notes:

DEF

Name (Last, First, Middle)  
**Kraft, Robert K.**

Alias

VICTIM

Victim's Name (Last, First, Middle)  
**State of Florida**

Race  
**N/A**

Sex  
**N/A**

Date of Birth  
**N/A**

Local Address (Street, Apt. Number) (City) (State) (Zip)  
**210 Military Trail, Jupiter, FL, 33458**

Phone  
**(561) 746-6201**

Address Source  
**Known**

Business Address (Name, Street) (City) (State) (Zip)  
**( )**

Phone  
**( )**

Occupation  
**Government**

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe the above named Defendant committed the following violation of law. The person taken into custody....

- committed the below acts in my presence.
- was observed by \_\_\_\_\_ who told \_\_\_\_\_ that he/she saw the arrested person commit the below acts.
- confessed to \_\_\_\_\_ admitting to the below facts.
- was found to have committed the below acts, resulting from my (described) investigation.

On the \_\_\_\_ day of \_\_\_\_, **20** at \_\_\_\_  A.M.  P.M. (Specifically include facts constituting cause for arrest)

In October of 2018 members of the Jupiter Police Department began an investigation into criminal activity occurring at Orchids of Asia Day Spa, located at 103 S. US Highway 1 C2 in Jupiter. On January 17, 2019, covert surveillance equipment was installed in Orchids of Asia Day Spa pursuant to a sneak and peek warrant. The following narrative is a description of the illicit activity that took place.

Room Surveillance: Det.C. Cook #404  
Room Camera # JPPD Cam 3

January 19, 2019, 1645hrs-1725hrs

Defendant: Robert Kraft, (W/M, 06/05/41) FL tag 845 (passenger), blue shirt, blue ball cap

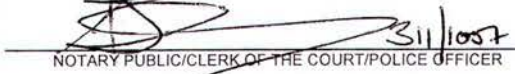
On January 19th, 2019, video surveillance was conducted at the target business. At approximately 1645hrs, Kraft entered the listed establishment and paid for services in cash at the front desk to an Asian female, previously identified as [REDACTED] which was captured on JPPD Cam 5. Kraft is taken by [REDACTED] to a massage room identified as JPPD Cam 3. Kraft undressed, laid on the massage bed completely nude and partially covered himself with a sheet. Kraft was observed using a cell phone while waiting in the room. At approximately 1649, [REDACTED] and another female, previously identified as [REDACTED], entered the room and both began massaging Kraft. A short time later the sheet is removed as Kraft laid on the massage bed face down. At 1712 hours, Kraft turned over onto his back and the lights in the room go out. At 1714 the room is illuminated and [REDACTED] can be seen with her hands near Kraft's genitals. The room is illuminated again and [REDACTED] can be seen standing to Kraft's right side and her right hand is seen manipulating Kraft's penis. At 1716 hours, [REDACTED] can be seen wiping Kraft's penis with a white towel. At 1724 hours, Kraft handed both [REDACTED] and [REDACTED] cash, and they responded by hugging him. [REDACTED] and [REDACTED] then proceeded to finish dressing Kraft, and he left the room.

Surveillance on Scene: At 1645hrs, a white male later identified as Robert Kraft (W/M 06/05/41) entered the establishment through the front door, which was observed by Agent M. Nicholson #342. At 1725hrs, the Kraft exited the front door of the business and entered the front passenger seat of a 2014 White Bentley, bearing FL tag 845, which observed by Agent Nicholson. Officer Kimbark #368, followed the Bentley and conducted a traffic stop on the vehicle. The front seat passenger was positively identified by his Massachusetts driver's license as Robert Kraft, (W/M, 06/05/41).

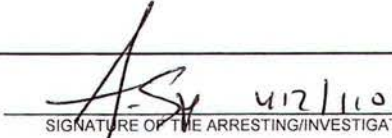
Based upon the following information it has been determined that Robert Kraft did commit, engage in, or offer to commit, prostitution, lewdness, or assignation, contrary to Florida Statute 796.07(2)(e) and (4)(a)1..(2 DEG MISD) Offer To Commit Prostitution.

ADMIN

SWORN AND SUBSCRIBED BEFORE ME

  
NOTARY PUBLIC/CLERK OF THE COURT/POLICE OFFICER

**February 22, 2019**  
DATE

  
SIGNATURE OF THE ARRESTING/INVESTIGATING OFFICER

**A.Sharp #412/1101**  
NAME OF OFFICER (PLEASE PRINT)

**February 22, 2019**  
DATE

PAGE  
**1 OF 1**