

Agency Code	Gang Related	Date of Supplement	MIAMI-DADE POLICE DEPARTMENT	Agency Report Number	FD109 2319 123327	1. Original Supplement	2. Supplement
Original Date Reported	Original Primary Offense Description	Victim # 1 Name	Original NCIC/UCR Code	A-Admitted C-Committed	New Statute Violation Number	New NCIC/UCR Code	
3/19/09	MVA W/FBI						
Original OFF/INC Location	Offense Changed To						

THIS AG. RESPONDED TO GATE H-5 CONTINENTAL FLIGHT 190 RE: A DISTURBANCE.

UPON ARRIVAL THE CAPTAIN STATED THAT THERE WAS A PASSENGER ON BOARD THAT WAS OBSERVED MASTURBATING.

CONTACT WAS MADE WITH Z-1 PATRICIA PEREA, WHO STATED THAT SHE WAS SITTING NEXT TO S-1 ELVIS CRESPO DIAZ ABOARD FLIGHT 190 LEAVING HOUSTON, TEXAS EN ROUTE TO MIAMI, FLORIDA. Z-1 FURTHER STATED THAT APPROXIMATELY 15 MINUTES AFTER THE PLANE DEPARTED S-1 COVERED HIMSELF WITH A BLANKET AND BEGAN TO MASTURBATE AND WHILE HE WAS MASTURBATING HE REMOVED THE BLANKET AND EXPOSED HIMSELF.

S-1 WAS QUESTIONED OVER THE INCIDENT AND STATED "I DONT REMEMBER DOING THAT"

CONTACT WAS MADE WITH FBI AGENT GAIER WHO STATED TO FORWARD THE REPORT.

TSA AGENT JOSEPH LONDON AND SGT PETRAS WERE ON THE SCENE.

Suspect Code	Code #	Offense Indicator	Residence Type	Citizenship	Drug Indication	Alcohol Indication	
B - Suspect A - Arrested	1 M 3 Both	1 M 3 Both	1 City 3 Florida 2 County 4 Out of State	1 Yes 8 Unknown 2 No	1 Yes 8 Unknown 2 No	1 Yes 8 Unknown 2 No	
Drug Activity	Substance	Quantity	Drug Type	Drug Type	Drug Type	Drug Type	
N. N/A	B. Buy	D. Other	M. Manufacture/Production	Z. Other	N. N/A	A. Amphetamine	
P. Possession	T. Traffic	E. Use	K. Dispense/Distribute	M. Manufacture/Production	D. Barbiturate	C. Cocaine	
					H. Hallucinogen	M. Marijuana	
					O. Other/OTC	P. Paraphernalia/Equipment	
						S. Synthetic	
						U. Unknown	
						Z. Other	
Name of Parent or Custodian (Last, First, Middle)							Residence Phone
Address (Street, Apt. Number)							Business Phone
Notified By: (Name)							Date
Released to: (Name)							Relationship
Person/Unit Notified							Time
Officer(s) Reporting							ID. Number(s) / Location Code
Officer Reporting (if Applicable)							ID. Number
Offense							Clearance Type
Exception Type							2. Arrest on Primary Offense Secondary Offense Without Prosecution
3. Death of Offender							4. V/W Refused to Cooperate
5. Prescription Declined							6. Juvenile / No Custody
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Agency Code 30	Agency Report Number MIAMI-DADE POLICE DEPARTMENT	Juvenile In Report 03-19-09	1. Original 2. Supplement 12
Date of Supplement	Original Primary Offense Description MOA 1B1	Victim # 1 Name	Original NCIC/UCR Code
Original Case Reported 03-19-09	Primary Offense Changed To	A-Attempted C-Committed	New Statute Violation Number
Original OFF/INC Location			New NCIC/UCR Code

THIS OIC + OIC COUNTY WIDE BACK UP UNITS TO K9 83; CAL AT GATE #5 (CONTINENTAL FLIGHT 190 IN FLIGHT) TO A DISTURBANCE ON BOARD THE AIRCRAFT IN FLIGHT. UPON ARRIVAL THE CAPT OF THE FLIGHT STATED A PASSENGER HAD BEEN MASTURBATING ON BOARD THE AIRCRAFT DURING FLIGHT. W#1 POINTED OUT S#1 TO K9 83 AS THE PERSON MASTURBATING ON THE FLIGHT + K9 83 + OIC LOUQUAY RESPONDED + SPOKE TO S#1.

THIS OIC SPOKE TO W#1 WHO STATED APPROX 15 MINUTES INTO THE FLIGHT HE OBSERVED S#1 WITH HIS PANTS DOWN + HIS PENIS EXPOSED + S#1 WAS MASTURBATING WHILE SITTING IN HIS SEAT. AT THIS TIME W#2 RESPONDED + ALSO OBSERVED S#1 MASTURBATING + S#1 WAS TOLD TO STOP + S#1 COMPLIED.

W#2 STATED HE OBSERVED S#1 WITH HIS PENIS EXPOSED AND OBSERVED S#1 MASTURBATING. W#2 ADVISED THAT HE WAS THE ONE WHO TOLD S#1 TO STOP MASTURBATING + S#1 COMPLIED.

OIC LOUQUAY SPOKE TO 2#1 (PASSENGER SEATED NEXT TO S#1) + 2#1 STATED THAT SHE OBSERVED S#1 WITH HIS PENIS EXPOSED + S#1 WAS MASTURBATING. 2#1 OBSERVED THIS AFTER THE BLANKET S#1 HAD ON HIS LAP FELL.

THIS OIC SPOKE TO FBI AGENT GRILE + GAVE HIM W#1 + W#2'S INFORMATION + ALL OTHER CONTACTS WILL BE WITH AGENT GRILE + K9 83.

Suspect Code 9 - Suspect A - Arrestee	Code #	Offense Indicator 1 B1 2 B2 3 B3	Residence Type 1 City 2 Rural 3 County 4 Out of State	Citizenship	Drug Indication 1 Yes 2 No 3 Unknown	Alcohol Indication 1 Yes 2 No 3 Unknown	
Drug Activity S. Sell N. N/A P. Possess T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Anesthetics B. Barbiturate C. Cocaine E. Heroin	H. Hydrocodone M. Marijuana O. Opioid/Drug	P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other
Name of Parent or Custodian (Last, First, Middle)							Residence Phone
Address (Street, Apt. Number)							(City) (State) (Zip)
Business Phone							
Notified By: (Name)	Date	Time	Juvenile Disposition 1. Handled/Processed Within Dept. and Released 2. Turned Over to HRB / CYP 3. Incarcerated (County Jail)		Date		
Released to: (Name)	Relationship	Date	Time				
Person/Unit Notified	Time	Related Report Number(s)					
Officer(s) Reporting CRUITZ A	ID. Number	Routed To	Retained To	Assigned To	By	Date	
			3853-A1		AM106	03-19-09	
Offense Status	Clearance Type 1. Arrest E. Exceptional 3. Unbonded 4. Open Period	A-Adult J-Juvenile	Date Cleared	Jail Number	Number Arrested		
Exception Type 1. Exemption Declined	2. Arrest on Primary Offense Secondary Offense Without Prosecution	3. Death of Offender 4. V/W Released to Cooperator	5. Prosecution Declined 6. Juvenile / No Custody	OBTS Number	Page 1	Page 13	