7th. Judicial Circuit 707 Charging Affidavit - Flagler

Arrest #	Bk#
Allest #	DK#

Pg #1 of <u>3</u>

ARREST □ NOTICE TO APPEAR □ AFFIDAVIT ⊠ C.C. □ ADULT ☑ JUVENILE □ Court Case Number: 13 -763 CFF								3 CFAH						
(ORI) FL: 1 8 0	0 0	0 0	Agency Name:	FLAGLE OFFICE	R CO		SHERIFF			Agency Case Number:	e 20	13-141	98	
FCIC/NCIC Check? Yes	⊠ No □	OBT	TS#			L	JCR:	Date Arrested:			Time o			
ADDRESS OF ARREST:		193					Arrested By:				ID Number			
DEFENDANT (L,F,N	n): Bova, Jo	seph, Fr	ank II				A.K.A.: Joe	•			Sex: MAI		Race: Wht	
DOB: 12/22/87 Age: 2	Drive ID No	er's Lic/	B100-	486-87-421-	1		State: FL	Year Expires:		2020	S.S. #:			
Height: 5-8 Weigh		Hair:	blond	Eyes: blu	ıe	POB	t, Country)	Margate, Fl	orida	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Statement: Yes ☐ No ☒	
Scars, Marks, Tattoos: Tattoos on lower al	odomin and left thi	igh		Business & Occupation:	unemplo		r, country)						Citizenship:	
Probation: Yes 🗆 No	Sexua	al Predator:	Yes	□ No 🛛	Eng	glish:	Yes ⊠ N	[о 🗆	_	Deaf/Mut	te:	Yes	□ No ⊠	
Address-Mailing/Permanent		EET, APT. N	NUMBER)				ITY) (STATE)						ENCE PHONE	
Address-Local	Moody Blvd (STRI	EET, APT. N	NUMBER)						32110  ZIPCODE RESIDENCE PHONE					
Address-Other(Employer/School)	(STR	EET, APT. 1	NUMBER)	ii.		(CI	TY)	(STAT	E)	ZIPCOL	DE	BUS/SC	HOOL PHONE	
CHARGES DOMINION	ESTIC YES C	Attach	ments: Affi	idavit(s) 🛛 State	ment(s)	□ NTA S	Schedule 🔲 Re	port 🔲 Traf	fic Inf	raction(s)	DUI 🗆	Total Char		
#1 Charge: First Degree Murder		FE	L MIS	D ORD	FS/OR 782.04			Citation	No.:		T	Bond:	ges.	
#2 Charge:		FE	L MIS	D 🗆 ORD 🗆	FS/OR			Citation	No.:			Bond:		
#3 Charge:		FE	L MIS	D ORD	FS/OR	D:		Citation	No.:			Bond:		
CO-DEFENDANT	Co-Def #1. Arreste	ed? Y 🔲 N I	☐ Fel ☐	Misd. 🔲 Traf. 🗀	Ord.	] NTA	Co-Def #2	. Arrested? Y			Misd. $\square$	Traf. 🔲 (	Ord. NTA	
#1 NAME(L,F,M):								Race:		Sex:	DO	OB:	Age:	
#2 NAME(L,F,M):							-	Race:		Sex:	DC	OB:	Age:	
The undersigned certifies and swears that there is probable cause to believe the above named defendant, on the 21 day of February, 2013, at approximately 10:09 a.m. p.m. at 6020 E. S.R. 100 Palm Coast, Florida within FLAGLERCounty, violated the law and did then and there:  On Thursday, February 21, 2013, during the evening hours, Zuheily Roman Rosado was working as a store clerk at the Mobil Gas Station located at 6020 East State Road 100 Palm Coast, Florida 32164. The video surveillance obtained from the Mobil Station and neighboring businesses, showed Rosado behind the counter dressed in her Mobil uniform leaning on the counter looking through the front window of the store, which faced a southerly direction. At approximately 10:09pm, and captured on the store's video surveillance cameras, Joseph Bova was observed coming from behind the store wearing a dark colored t-shirt with a white logo on the back underneath the collar, blue jeans, and dark colored footwear. Bova entered the store and paused for a brief second before walking towards the counter firing three rounds. Each round struck Rosado. Bova exited the store without taking any money or merchandise and ran behind the store, through a wooded area and then through the parking lot of Coconuts Carwash, located at 6030 Old Kings Road Palm Coast, FL 32164. Rosado was later found behind the counter on the floor by a customer who had entered the store to make a purchase. The customer called 911 and Rosado was pronounced deceased on scene. The Flagler County Sheriff's Office (FCSO) began a homicide investigation.  The scene was processed by Florida Department of Law Enforcement (FDLE) Crime Scene Technician. While processing the crime scene, three fired Luger 9mm cartridge casings and three projectiles were taken and analyzed by the FDLE lab. FDLE analysts confirmed that the weapon used to kill Rosado was a SKKY 9mm Luger semi-automatic handgun.														
NOTICE TO APPEA	AFFEARA	NCE	INSTRU	EED NOT APPEA	E REVE	ERSE SID	E OF YOUR C	OPY 🗆		FINE, ANI	•			
I AGREE TO APPEAR IN COURT I BEFORE THE COURT AS REQUIRE	EREIN TO ANSW D, OR PAY THE L	VER THE OF LISTED FINE	FENSE CH	IARGED OR TO HELD IN CON	PAY TH	HE FINE II OF COU	NDICATED. I L RT AND A WA	ARRANT FO	ID TH	AT SHOULD ARREST WI	LL BE ISS	ULLY FAII SUED.	. TO APPEAR	
								Juve Disp.						
			SIGNA	TURE OF JUVE	NILE PA	ARENT C	R CUSTODIA	N CITA	TION	No.				
SIGNATURE OF DEFENDANT	DATE		RELAT	TIONSHIP TO JU	JVENILI	Е								
Sworn to and subscribed before me, to This 12 day of September, 2013.	ne undersigned		I swear	/affirm the above	statemen	nts are co	frect and true.	<u> </u>			Rt '	Thumb		
OFFICEP'S COMPLAD ADVANT'S SIGNATURE														
Name: CMD SL		3 E					/ 551							
Notary Public   Law Enforcement Personally Known   Produced Iden Type of Identification:		icer 🛛	NAME(PRINTED) ID NUMBER 409											
OFFICIAL U	SE ONLY		Inmate & facili	Number ity:										

## Witness/Victim/Evidence Form 707-A

☐ Arrest
☐ Notice to Appe

✓ Adult✓ Juvenile

Court Case

Pg#2 of 3

Defendant D			Agenc	y Case	Numbe	THE PARTY NAMED IN COLUMN TWO		A STATE OF THE STA	Property market	16 11 2013
Name: Bova, Joseph, Fran	Number		2013-14198							
Name (L,F,M): Rosado, Zuheily		Vic ⊠ Wit □	Race: Hispa	nic	Sex:         Age:         DOB:           M □ F ☒         33         03/06/80		′80	SSN:		
Address (#, Street, City, State): 601 Madison Green	n Circle Palm Coast, FL				Zip: 32164		Home Phone:			Statement: Yes ☐ No ☐
Bus./School Address:							Zip:			Bus.
Relative/		Relative/C	ontact							Phone:
Contact Name:		Address:						DOD.		
Name (L,F,M):		Vic □ Wit □	Race:		Sex:	F 🗆	Age:	DOB:		SSN:
Address (#, Street, City, State):					Zip:		Home Phone:			Statement: Yes No
Bus./School Address:							Zip:			Bus. Phone:
Relative/		Relative/C	ontact				-		$\neg$	Phone:
Contact Name:		Address:	Race:		Sex:		Age:	DOB:	-	SSN:
(L,F,M):		Wit 🗎			М 🗆	F 🗆		202.		
Address (#, Street, City, State):					Zip:		Home Phone:			Statement: Yes ☐ No ☐
Bus./School Address:							Zip:			Bus. Phone:
Relative/ Contact Name:		Relative/Co	ontact							Phone:
Name (L,F,M):		Vic U	Race:		Sex:	모디	Age:	DOB:		SSN:
Address		WIL L			Zip:	ГЦ	Home	L	$\dashv$	Statement:
(#, Street, City, State): Bus./School							Phone: Zip: -		$\dashv$	Yes No Bus.
Address: Relative/		Relative/Co	ontact						-	Phone:
Contact Name:		Address:								
Name (L,F,M):		Vic U	Race:		Sex:	F 🗆	Age:	DOB:		SSN:
Address (#, Street, City, State):					Zip:		Home Phone:			Statement: Yes ☐ No ☐
Bus./School Address:					-		Zip:			Bus. Phone:
Relative/ Contact Name:		Relative/Co	ontact						$\neg$	Phone:
Name (L,F,M):		Vic   Wit	Race:		Sex:	pП	Age:	DOB:		SSN:
Address		WIL L			M □ .	ГЦ	Home			Statement:
(#, Street, City, State): Bus./School							Phone: Zip:		$\dashv$	Yes No DBus.
Address:		D-I-tima/C	-t-nt T		_				_	Phone:
Relative/ Contact Name:		Relative/Co	ontact							Phone:
	EVID	ENCE	COL	LECT	(ED					
Description of Evidence SKKY 9mm handgun model CPX-1				e Recovere 9/10/13	d		rial/I.D. Numl 57400	ber		Drug Amount
Owner(Name) Bova, Joseph, Frank II	(Address) 4600 E.Moody Blv	d unit 4J B		(9) 4 (4) (5) (6) (8) (7)	)	(Phone)			Value	<u> </u>
Description of Evidence			Date	e Recovere	d	Model Ser	rial/I.D. Numl	ber		Drug Amount
Owner(Name)	(Address)					(Phone)			Value	;
Description of Evidence			Date	e Recovere	d	Model Ser	ial/I.D. Numb	рег		Drug Amount
Description of Evidence			Date	e Recovered	d	Model Seri	ial/I.D. Numb	per		Drug Amount
Description of Evidence	-		Date	e Recovered	d	Model Seri	ial/I.D. Numb	ber		Drug Amount
Description of Evidence			Date	e Recovered	d	Model Seri	ial/I.D. Numb	oer		Drug Amount
Description of Evidence			Date	e Recovered	d	Model Seri	ial/I.D. Numb	per		Drug Amount
Description of Evidence			Date	e Recovered	d	Model Seri	ial/I.D. Numb	per		Drug Amount
Description of Evidence			Date	e Recovered	d	Model Seri	ial/I.D. Numb	эег		Drug Amount

I certify that the foregoing is a complete list of witnesses/victims & evidence known to me.

DET. MOY
Investigating Officer

409 ID Number FAACER COUNTYS.O.

	rrative 707-B □ Arra Ipplement □ Not		Court Case							
Defen	Number: Page #3 of 3									
-	CHARGES DOMESTIC YES  Attachments: Affidavit(s)  Statement(s)  NTA Schedule  Report  Traffic Infraction(s)  Total									
# 4	Charge:		MISD ORD	FS/ORD:	Citation No:	Charges: Bond:				
#	Charge:	FEL 🗆	MISD ORD	FS/ORD:	Citation No:	Bond:				
#	Charge:	FEL 🗆	MISD ORD	FS/ORD:	Citation No:	Bond:				
# Charge: FEL MISD ORD FS/ORD: Citation No: Bond:										
		(2)	MA	Lun		-				
Notary	Public ☐ Law Enforcement Officer ⊠		CER'S/COMPLAINAN	T'S SIGNATURE						
Type of	Identification:	NAME(PRINTED)	M. MOY		ID NUMBER					