

CIRCUIT COURT MIAMI-DADE COUNTY - CRIMINAL DIVISION

SECTION: F051
 PUNJWANI, SOHAIL
 690 NE 50TH TER
 MIAMI, FL 33137-3023
 05921 LNI 2010BB018937
 BOND ISS 07/18/2010

F10020963
 10/29/1959
 W/M
 690771
 \$5,000
 ARRESTED: 07/18/2010



NEW ADDRESS

DATE	ADDRESS
DATE CERT. COPY INFO (del/mailed)	
AUG 17 2010	Asax Kueber
ADJ INSOLVENT - APPT.P.D./R.C./P.C.A.C.	
DETERMINATION OF INDIGENCY	
<input type="checkbox"/> INDIGENT	
<input type="checkbox"/> NOT INDIGENT	
CASE DISMISSED	
NO ACTION	
NOLLE PROS	
TRANSFERRED JURISDICTION TO	

BOND RELEASE	CIVIL JUDGMENT
BOND ESTREATURE	POWER #
	CIVIL CASE #

TO BE ARRESTED ON **DEBORAH WHITE-LABORA**

JUDGE/CLERK	DATE	14 Monday - H	DEBORAH WHITE-LABORA	DO MD.
	8-3-10	AUG 17 2010	AUG 18 2010	AUG 19 2010
GUILTY				
NOT GUILTY	written plea	✓		
WAIVER OF JURY				
STATE		K Walters	A. BAIN	A. BAIN
DEFENSE	Brian H. Bieber	A Bieber	A. Bieber ANP pd	B. Bieber ESG
INTERPRETER		(dp)		DP
CT. REPORTER		Y Collier	Y. Cordoba	Do
FIRM		official	McMANNON	Do

CLERK'S MINUTES	DEPT. ACTION DATE	ORAL NOTICE	CONTINUED TO/FOR	S	D	C
8-3-10-1 Notice of Appearance			AUG 09 2010			
of Intent to participate	AUG 17 2010		(dp) 8-18-2010 re: drug court (Div 51)			
in Discovery, Demand	AUG 18 2010	DNP	8-19-2010 do			
for Jury Trial	AUG 19 2010	DP	9-15-10 Do			
AUG 17 2010 see discovery	SEP 15 2010	DNP	9-28-2010 plmt.			
Exhibit. Case transferred	SEP 28 2010	DP	11-30-10 Do			
to Div 31 re: drug program.	NOV 30 2010	DP	2-2-11 plmt			
	FEB 02 2011	DP	3-14-2011 do			

CIRCUIT COURT MIAMI-DADE COUNTY
 CRIMINAL DIVISION
 THE STATE OF FLORIDA

VS. NO. F10-20963

JUDGE/CLERK	TERORAH WHITE-LABORA <u>DD</u>					
DATE	NOV 30 2010 <u>DA</u>	FEB - 2 2011				
GUILTY						
NOT GUILTY						
WAIVER OF JURY						
STATE	A. BAIN	<u>DD</u>				
DEFENSE	B. Bieber					
	<u>DD</u>					
INTERPRETER						
CT. REPORTER	Y. Cordoba J. Concepcion					
FIRM	MCMANHO <u>DD</u>					
CLERK'S MINUTES	DEFT - ACTION DATE	ORAL NOTICE	CONTINUED TO/FOR	S	D	C
AUG 19 2010 DEF O/M TO						
Include DUE WITH Drug CRT.						
- Denied. DEFT. Referral						
TO Maximum Counseling Prog.						
SEE Waiver of Speedy TRI.						
SEP 28 2010 See NA/AA'S						
LUG Sheet.						
NOV 30 2010 See rpt and						
NA/AA'S from MAXIMUM						
Counseling. D/AA to						
travel - grt. (ref. 12/31/10						
FEB - 2 2011 See rpt and						
NA/AA'S from MAXIMUM						
Counseling SVCS. See						
order for donation to						
Friends of Drug A.						
c/o Richard BARN 501 N.E						
1 Ave Ste 201 M.F. 33132						



IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
IN AND FOR MIAMI- DADE COUNTY, FLORIDA SPRING TERM, 2010

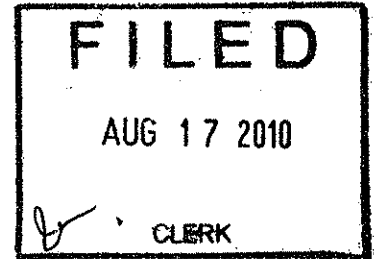
THE STATE OF FLORIDA v.

SOHAIL PUNJWANI

INFORMATION FOR

1. POSSESSION OF COCAINE 893.13(6)(a) Fel. 3D

Defendant(s)



IN THE NAME AND BY THE AUTHORITY OF THE STATE OF FLORIDA:

KATHERINE FERNANDEZ RUNDLE, State Attorney of the Eleventh Judicial Circuit,
prosecuting for the State of Florida, in the County of Miami-Dade, by and through her undersigned
Assistant State Attorney, under oath, Information makes that:

BETTENDORF-PL,KRISTI-CC :NL 08/10/2010

Circuit Court Direct File

Jail No. 100056754 ,Bkd: 7/18/2010 , CIN: 0664607, W/M, DOB: 10/29/1959, SS#: 000000000

F10020963

Tinkler-Mendez (F006)

(CC#: F10020963)

COUNT 1

SOHAIL PUNJWANI, on or about July 18, 2010, in the County and State aforesaid, did unlawfully and feloniously have in the defendant's actual or constructive possession a controlled substance, to wit: COCAINE, in violation of s. 893.13(6)(a), Fla. Stat., contrary to the form of the Statute in such cases made and provided, and against the peace and dignity of the State of Florida.

DEFENDANT(S):

PUNJWANI, SOHAIL

COURT CASE #:

F10020963

Intake Atty: 13720 BETTENDORF-PL,KRISTI-CC
21st Day: 08/08/2010 Arraign: 08/17/2010

Unit: 001 FSU-Case Screening

DIVISION: Tinkler-Mendez

Police #: 201000074432
Department: 002 Miami Beach
Arrest Date: 07/18/2010

Book Date: 07/18/2010

JailNum: 100056754

Lead Officer: 00783 SAYEGH,M

PID: RACE: W Sex: M

DOB: 10/29/1959

Dept/Station: 002-

IDS: 0690771

CIN: 0664607

Remarks:

PFC Date(s): 07/26/2010 08/09/2010

Arraignment Action

Date

07/19/2010

Clerk File Date: 07/19/2010

Domestic: N

Lab #:

ME #:

Case Filing Decision

Date

R1 Reset-Officer Failure to Appear 07/26/2010
01 NA-Officer Failed to Appear 08/09/2010
HL Hold-Lab 08/09/2010

Property Release: N

Extradite: 4 Felony - No extradition

VictimType: 33 Victimless - Drug Crime

Min/Mandatory: 1 Not Charged/Not Filed

Tel/Video Depo:

Career Criminal:

T	D	CJIS	Description	Charge	Filing Decision	Count
F	3	89313006A1F3N	COCAINE/POSSESSION	FF	Filed Felony	1

ATTORNEY: _____
Assistant State Attorney

APPROVED: _____
Assistant State Attorney

DATE: _____

DATE: _____

917

CITATIONS

RECD: # 1

COMPLAINT/ARREST AFFIDAVIT

JENNIFER VENEGAS

POLICE CASE NO

2010-00074432

COMPLAINT/ARREST AFFIDAVIT

COURT COPY

SPECIAL OPERATION	<input checked="" type="checkbox"/> FELONY <input type="checkbox"/> MISD <input checked="" type="checkbox"/> TRAFFIC <input type="checkbox"/> JUV <input type="checkbox"/> DV <input type="checkbox"/> MOVES <input type="checkbox"/> CIV INF	JAIL NO	56 734	PMHD	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	COURT CASE NO	PT020963
IDS NO	AGENCY CODE	MUNICIPAL P.D. DEF ID NO	MDPD RECORDS AND ID NO	STUDENT ID NO	GANG ACTIVITY RELATED ARREST	FRAUD RELATED ARREST	

DEFENDANT'S NAME (LAST FIRST MIDDLE) **PUNJWANI, SOHAIL** ALIAS and / or STREET NAME _____ SIGNAL 100 150 200 300 400 500

DOB (MM/DD/YYYY) **10/29/1959** AGE **50** RACE **W** SEX **M** Hispanic Not Hispanic ETHNICITY **MIDDL** HEIGHT **5 6** WEIGHT **155** HAIR COLOR **GRY** HAIR LENGTH **MED** HAIR STYLE **BUS** EYES **BRO** GLASSES Yes No FACIAL HAIR **CLN** TEETH **NOR**

SCARS TATTOOS, UNIQUE PHYSICAL FEATURES (Location, Type, Description) _____ PLACE OF BIRTH (City, State/Country) **UNKNOWN PAKISTAN**

LOCAL ADDRESS (Street Apt Number) **690 NE 50 TER MIAMI, FL 33137-** (City) (State) (Zip) PHONE _____ CITIZENSHIP **USA**

PERMANENT ADDRESS (Street Apt Number) HOMELESS UNKNOWN (City) (State/Country) (Zip) PHONE _____ OCCUPATION _____

BUSINESS OR SCHOOL NAME AND ADDRESS (Street) (City) (State/Country) (Zip) PHONE _____ ADDRESS SOURCE DL Verbal _____

DRIVER'S LICENSE NUMBER / STATE **P525780593890 FL** SOCIAL SECURITY NO _____ WEAPON SEIZED? Type Yes No If Def has Concealed Weapons Permit PERMIT # W _____ INDICATION OF Alcohol influence Y N UNK Drug influence Y N UNK

ARREST DATE (MM/DD/YYYY) **07/18/2010** ARREST TIME (HH:MM) **00:19** ARREST LOCATION (include name of business) **ALTON RD /CHASE AVE CITY OF MIAMI BEACH, FL 33140** GRID _____

CO-DEFENDANT NAME (Last, First, Middle)	DOB (MM/DD/YYYY)	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE
1		<input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR
CO-DEFENDANT NAME (Last, First, Middle)	DOB (MM/DD/YYYY)	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE
2		<input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR
CO-DEFENDANT NAME (Last, First, Middle)	DOB (MM/DD/YYYY)	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE
3		<input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR

JUV only	Parent	Guardian	Foster Care	(Name)	(Street Apt Number)	(City)	(State/Country)	(Zip)	(Phone)	Contacted?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/> Yes <input type="checkbox"/> No

CHARGES	CHARGE AS	COUNTS	FL STATUTE NUMBER	VIOL OF SECT	CODE OF	UCR	DV	WARRANT TYPE OR TRAFFIC CITATION
1 DUI	<input checked="" type="checkbox"/> F S <input type="checkbox"/> ORD	1	316.193					9477 EX
2 POSSESSION OF COCAINE (UNDER)	<input checked="" type="checkbox"/> F S <input type="checkbox"/> ORD	1	893.13(6)A					
3	<input type="checkbox"/> F S <input type="checkbox"/> ORD							
4	<input type="checkbox"/> F S <input type="checkbox"/> ORD							

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 **18** day of **JULY**, 20 **10** at **00:11** (HH:MM) at **ALTON RD /CITY OF MIAMI BEACH, FL 33140 NORTHBOUND** (Narrative, be specific)

OFFICERS OBSERVED THE DEF DRIVING A BLACK MERCEDES, FL TAG SO14KS, NORTHBOUND ON ALTON RD. THE DEF WAS UNABLE TO DRIVE WITHIN A SINGLE LANE OF TRAFFIC, 3 TIMES SWERVING INTO THE RIGHT LANE NEARLY SIDESWIPING VEHICLES AND THEN QUICKLY OVER CORRECTING THIS ACTION BY SWERVING LEFT AND NEARLY STRIKING THE CURB. A TRAFFIC STOP WAS CONDUCTED AT THE INTERSECTION OF ALTON RD AND CHASE AVE. OFFICERS APPROACHED THE VEHICLE AND IMMEDIATELY NOTICED THE DEF HAD A WHITE POWDER SUBSTANCE AROUND HIS NOSTRILS AND ON THE FRONT OF HIS SHIRT. OFFICERS ALSO OBSERVED THE DEF HAD BLOODSHOT, WATERY EYES, SLURRED SPEECH AND THE SMELL OF ALCOHOL UPON HIM. THE DEF WAS ASKED FOR A DRIVER LICENSE AND HAD GREAT DIFFICULTY ATTEMPTING TO PRODUCE ONE. THE DEF WAS ASKED TO EXIT HIS VEHICLE AND WAS UNABLE TO STAND ON HIS OWN WITHOUT LEANING AGAINST IT. SFSTs WERE PERFORMED ON A FLAT, WELL LIT SURFACE. DEF DID NOT PERFORM

HOLD FOR OTHER AGENCY Name _____	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 (Juvonies notify Juvenile Division) anytime that my address changes.
I SWEAR THAT THE ABOVE STATEMENT IS TRUE AND CORRECT	SWORN TO AND SUBSCRIBED BEFORE ME	<input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof.	
OFFICER'S / COMPLAINTANT'S SIGNATURE Sayegh	COURT ID NUMBER/LOC CODE 783 (02) MIAMI BEACH AGENCY NAME	DAY OF JULY 10 DEPUTY OF THE COURT or Notary Public	SIGNATURE OF DEFENDANT / JUVENILE AND PARENT OR GUARDIAN _____

COMPLAINT/ARREST AFFIDAVIT CONTINUATION

OBT'S NUMBER	COMPLAINT/ARREST AFFIDAVIT CONTINUATION	POLICE CASE NO 2010-00074432
JAIL NO: 56754	COURT CASE NO F1020963	
IDS NO	AGENCY CODE 02	MUNICIPAL P.D. DEF ID NO
		MCPD RECORDS AND ID NO

DEFENDANT'S NAME (LAST FIRST MIDDLE) PUNJWANI, SOHAIL	DOB (MM/DD/YYYY) 10/29/1959
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ADDITIONAL CO-DEFENDANT NAME (Last, First, Middle) 4	DOB (MM/DD/YYYY)	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE <input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR
---	------------------	---

ADDITIONAL CO-DEFENDANT NAME (Last, First, Middle) 5	DOB (MM/DD/YYYY)	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE <input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR
---	------------------	---

ADDITIONAL CHARGES	CHARGE AS	COUNTS	FL. STATUTE NUMBER	VIOL. OF SECT	CODE OF	UCR	DV	WARRANT TYPE OR TRAFFIC CITATION
5	<input type="checkbox"/> F.S. <input type="checkbox"/> ORD							<input type="checkbox"/> JAC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRT CASE #
6	<input type="checkbox"/> F.S. <input type="checkbox"/> ORD							<input type="checkbox"/> JAC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRT CASE #
7	<input type="checkbox"/> F.S. <input type="checkbox"/> ORD							<input type="checkbox"/> JAC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRT CASE #
8	<input type="checkbox"/> F.S. <input type="checkbox"/> ORD							<input type="checkbox"/> JAC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRT CASE #

TO STANDARD. SEE DUI TEST REPORT. DEF ARRESTED. AN INVENTORY OF THE VEHICLE PERFORMED BY OFC ELMORE #877 INCIDENT TO ARREST AND PRIOR TO TOW REVEALED THAT IN THE CENTER CONSOLE THERE WAS A SMALL BAGGIE WITH A WHITE POWDER SUBSTANCE IN IT AND THAT THE CASE OF THE CELL PHONE THAT WAS ON THE DEF'S LAP WHEN PULLED OVER ALSO HAD A WHITE POWDER SUBSTANCE ON IT. OFC ELMORE #877 TESTED BOTH THESE ITEMS WITH A FERGUSON TEST KIT AND THEY WERE POSITIVE TO BE COCAINE.

HOLD FOR OTHER AGENCY Name	VERIFIED BY 	<input type="checkbox"/> HOLD FOR BOND HEARING DO NOT BOND OUT (Officer Must Appear at Bond Hearing)
I SWEAR THAT THE ABOVE STATEMENT IS TRUE AND CORRECT		<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.
OFFICER'S / COMPLAINT'S SIGNATURE Sayegh	COURT ID NUMBER/LOC CODE 783 (02) MIAMI BEACH AGENCY NAME	SWORN TO AND SUBSCRIBED BEFORE ME THE UNDERSIGNED AUTHORITY THIS 18 DAY OF JULY 2010 Deputy of the Court or Notary Public
NAME (Printed)		Signature of Defendant / Juvenile and Parent or Guardian

COMPLAINT/ARREST AFFIDAVIT CONTINUATION - COURT COPY

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT IN AND FOR MIAMI-
DADE COUNTY, FLORIDA

STATE OF FLORIDA

CASE NO.

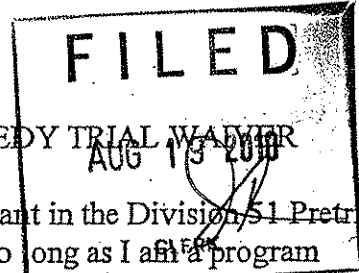
F10-020963

vs.

JUDGE DEBORAH WHITE-LABORA

Defendant(s)

Shahid Pournazeri



DEFERRED PROSECUTION AGREEMENT AND SPEEDY TRIAL WAIVER

I understand that I have been tentatively accepted as a participant in the Division 51 Pretrial Diversion Program, and that charges against me will not be prosecuted so long as I am a program participant in good standing and that my case will not come to trial during that time.

I understand further that I have a right to have my case brought to trial under Florida Rule of Criminal Procedure 3.191 within one hundred and seventy-five (175) days for felony charges, ninety (90) days for misdemeanor, as provided in that Rule, or within sixty (60) days as provided upon demand.

In order to participate in the Division 51 Pretrial Diversion Program, I do hereby freely and voluntarily waive my right to speedy trial on any and all pending cases in Division 51, to include felony, misdemeanor, or criminal traffic case that is deferred, pursuant to the Florida Rules of Criminal Procedure, Florida Constitution and United States Constitution. I understand that if I violate the rules of the Program, which have been explained to me and which I have agreed to, that my case will be returned to court for prosecution. I also agree to waive my right to the return of any weapons, electronic weapons or devices or arms seized pursuant to § 790.06 Florida Statutes.

8/19/10
Date

Defendant

CERTIFICATION OF ATTORNEY

I hereby certify that I am attorney of record for Shahid Pournazeri, that I have explained to him his right to a speedy trial under the laws of Florida; that he has freely and understandingly executed the foregoing waiver.

8/19/10
Date

Attorney

I give my consent, for the above named defendant, in this non-adversarial drug court, to speak to the Judge about personal and drug treatment concerns, in the above styled-case.

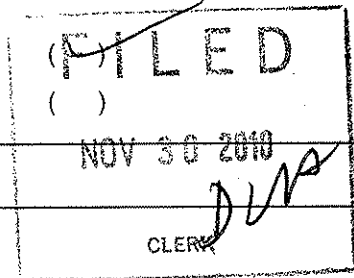
PRETRIAL SUPERVISION
"CONDITIONAL TRAVEL REQUEST FORM"

Client Information

Date: 11-30-10
Name: Sohail Punjwani
Telephone #: (954) 868-7596

Jail #: NIC
Case #: F10-20963

Approved
Denied



TRAVEL PLANS

Destination: NY, NY
Date of Departure: 12-22-10
Date of Return: 12-31-10
Destination Address: 142 W 70 ST #4R
Manhattan, NY 10023
Destination Phone: (786) 269-3877
Contact Phone: (954) 868-7596
Reason for Travel: Visiting family for
the Holiday

Conditions of Travel

Your request for travel is approved with the following conditions:

1. Date of Departure: 12-22-10
2. Date of Return: 12-31-10
3. You must report by phone (305) 874-1000 Ext. 2221 from your point of destination.

Ask for:

5. Other conditions: Report to your counselor
upon return to Miami

[Signature]
PROGRAM ASSIST.

[Signature]
DEFENDANT'S SIGNATURE

[Signature]
Judge

Failure to comply with the above conditions will result in the revocation of your PTS Bond!

PRETRIAL DIVERSION
"CONDITIONAL TRAVEL REQUEST FORM"

Client Information

Date: 9/17/10
Name: Sabaal Punjwani
Telephone #: 954-868-7596

Jail #: _____
Case #: F10-020963
Approved: ()
Denied: ()

FILED FOR RECORD
2010 SEP 17 PM 1:13
CLERK, CIRCUIT COUNTY COURTS
DADE COUNTY, FLA.
CIRCUIT CRIMINAL #:

TRAVEL PLANS

Destination: Denver, Colorado
Date of Departure: September 19, 2010
Date of Return: September 23, 2010
Destination Address: Residence Inn, Denver Highland Ranch
93 West Centennial Blvd.
Highland Ranch, CO 80126
Destination Phone: 303-683-5500
Contact Person: N/A
Reason for Travel: business purposes

Conditions of Travel

Your request for travel is approved with the following conditions:

1. Date of Departure: 09-19-10
2. Date of Return: 09-23-10
3. You must report by phone (305) 547-5308 or 547-5209 from your point of destination.

Ask for: _____

5. Other conditions: _____

[Signature] JUDGE'S SIGNATURE
[Signature] PROGRAM ASSIST.
[Signature] DEFENDANT'S SIGNATURE
attorney

Failure to comply with the above conditions will result in the revocation of your PTS Bond!

DIVISION

- CRIMINAL
- TRAFFIC/MISDEMEANOR
- OTHER —

**ORDER FOR RESTITUTION OR
~~DONATION~~/CONTRIBUTION
AND DISBURSEMENT**

THE STATE OF FLORIDA VS.

Sohail Punjwani

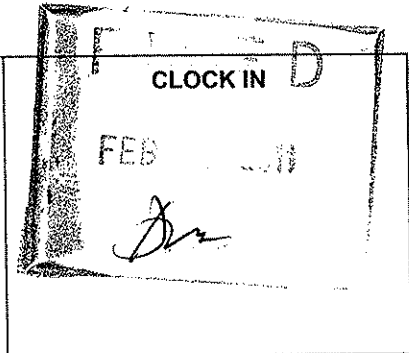
PLAINTIFF

DEFENDANT

CASE NUMBER: *F10-20963*

The defendant is ordered to pay to the Clerk of Courts a restitution or donation/contribution of \$ 100.00 plus a Clerk's Fee of ~~\$3.00~~ per payment, based on Florida Statute 28.24 (26) (a) for receiving and disbursing of all restitution payments.

ORDERED AND ADJUDGED that the Clerk of Courts upon receipt of the monies, issue a check in disbursement of the aforesaid amount, excluding the Clerk's Fee, and make such check payable to:



Friends of Drug Ct and mail the same to said person/organization at:
1/2 Richard Baron 501 N.E. 1 Ave Ste 201
MIA. F Zip 33132

DONE AND ORDERED in Miami-Dade County, Florida this 2 day of Feb, 20 11

STATE OF FLORIDA, COUNTY OF DADE
HEREBY CERTIFY that the foregoing is a true and correct copy of the original on file in this office. AD 20
HARVEY RUVIN, Clerk of Circuit and County Courts
Deputy Clerk



[Handwritten Signature]
Judge's Signature

receipt #

Information for Defendant

I understand that I am to pay the above amount in person or by mail at the Metro-Dade-Flagler Building (Room 1502), 140 West Flagler Street, Miami, Fl. 33130 or at:

- Richard E. Gerstein Justice Building, 1351 NW 12th Street, Suite 9000, Miami, Florida 33125
- Richard E. Gerstein Justice Building, 1351 NW 12th Street, Suite 8100, Miami, Florida 33125
- Richard E. Gerstein Justice Building, 1351 NW 12th Street, Suite 124, Miami, Florida 33125

and that I am responsible for keeping the receipt.

Payment is to be made by **cash** (please do not send cash in mail), **money order**, or **cashier's check** made payable to the **Clerk of Courts**. Please indicate your name, above case number, and write "Restitution Unit" on your payment.

Defendant's Signature: *[Handwritten Signature]* Date 2/2/11

IN THE COUNTY COURT OF THE ELEVENTH JUDICIAL CIRCUIT IN AND FOR MIAMI-DADE COUNTY, FLORIDA.

DIVISION	MEMORANDUM OF COSTS	CASE NUMBER
CRIMINAL		
THE STATE OF FLORIDA	VS.	CLOCK IN
PLAINTIFF	DEFENDANT/RESPONDENT	

<u>Court Costs/Fines/Fees</u>	<u>Amount</u>	<u>Statute</u>	<u>Discharge* Code</u>	<u>Note</u>
◆ Crimes Prevention Fund (Ord. 98-171)	\$ <u>50.00</u>	775.083(2)	_____	
◆ County/State (LETF)	\$ <u>5.00</u>	938.01(1)/938.15	_____	
◆ Crimes Compensation Trust Fund (CCA)	\$ <u>50.00</u>	938.03(4)	_____	
◆ Local Criminal Justice Trust Fund	\$ <u>225.00</u>	938.05(1)	_____	
◆ Add'l Court Costs (Ord. 04-116)	\$ <u>65.00</u>	939.185(1)(a)	_____	
◆ Surcharge (Ord. 05-123)	\$ <u>85.00</u>	939.185(1)(b)	_____	
◆ Teen Court (Ord. 98-185)	\$ <u>3.00</u>	938.19(2)	_____	
◆ Cost of Prosecution	\$ <u>100.00</u>	938.27(8)	_____	
◆ Public Defender Application Fee <input type="checkbox"/>	\$ <u>50.00</u>	27.52(1)(b)	_____	
◆ Cost of Defense <input type="checkbox"/>	\$ <u>100.00</u>	938.29	_____	
◆ Fine <input type="checkbox"/>	\$ _____	775.083 (1)	_____	
◆ Surcharge (5% of Fine) <input type="checkbox"/>	\$ _____	938.04	_____	
◆ Crime Stopper's Program <input type="checkbox"/>	\$ <u>20.00</u>	938.06	_____	
◆ Prostitution Civil Penalty <input type="checkbox"/>	\$ <u>500.00</u>	796.07(6)	_____	
◆ Domestic Violence Surcharge <input type="checkbox"/>	\$ <u>201.00</u>	938.08	_____	
◆ Rape Crisis Trust Fund <input type="checkbox"/>	\$ <u>151.00</u>	938.085	_____	
◆ Child Advocacy Trust <input type="checkbox"/>	\$ <u>151.00</u>	938.10(1)	_____	
◆ FDLE Operating Trust Fund <input type="checkbox"/>	\$ <u>100.00</u>	938.25	_____	
◆ Alcohol & Drug Abuse Programs <input type="checkbox"/>	\$ _____	938.21	_____	
◆ _____ <input type="checkbox"/>	\$ _____	_____	_____	

TOTAL MANDATORY (ALL CASES) \$ 583.00

Additional pursuant to specific requirements \$ _____
(fines/costs/fees as noted above)

GRAND TOTAL \$ _____ **DUE TODAY**

Payment is to be made by cash, credit card (MC or Visa), money order or cashier's check payable to, the Clerk of the Courts. Note, include your name, above case number, and write, "Fine/Costs" on your payment. Credit Card payments can also be made online at the Clerk's web address: www.miami-dadeclerk.com. Payment locations are:
Richard E. Gerstein Justice Building, 1351 N.W. 12th St., Suite 9000, Miami, FL 33125
Miami-Dade Flagler Building, 140 W. Flagler St., Room 1502, Miami, FL 33130

Defendant's Signature: _____ Date: _____

Defendant Current Address: _____
(Street) (City) (State) (Zip)

Done and Ordered in Miami-Dade County, Florida this _____ day of _____, 20____.

***DISCHARGE CODES:**
C- CONVERTED TO COMMUNITY SERVICE
J- JUDGMENT/LIEN
P- PLEA (STATE NEGOTIATED)
S- SUSPENDED
T- TIMED SERVED
W- WAIVED

Judge's Signature

THE STATE OF FLORIDA
VS: SOHAIL PUNJWANI

CASE NUMBER: F10020963 DATE MAILED: 01/12/2011

NOTIFY DATE	PARTIES NOTIFIED	DATE: WEDNESDAY FEBRUARY 02 2011	10:30 AM
01/12/11	DEFENDANT SOHAIL PUNJWANI 690 NE 50TH TER MIAMI FL 331373023	COURTROOM: 4-4 CASE HEARING TYPE: REPORT RE: DEFENDANT/RESPONDENT	
01/12/11	ATTORNEY BRIAN BIEBER 550 BILTMORE WAY #PH 3A CORAL GABLES FL 33134		
01/12/11	LEXINGTON NATIO PARRISH MARTINEZ 7315 NW 36 STREET MIAMI FL 33166		

JUDGE: DEBORAH WHITE-LABORA
 LOCATION: 1351 N.W. 12 ST
 JUSTICE BUILDING
 MIAMI, FL
 J/S: F051 1143

LEXINGTON NATIONAL INSURANCE CORPORATION

200 East Lexington Street, Suite 501 • Baltimore, Maryland 21202 • (410) 625-0800

GENERAL SURETY APPEARANCE BOND

POWER NO. 2010-BB-018937

ARREST/CASE NO. F10020963

STATE OF FLORIDA

VS.

Sohail Punjwani

SEND ALL COURT NOTICES TO:

DONDEE BAIL BONDS
 7315 NW 36 ST
 MIAMI FL 33166
 305-325-9889
 TRANSFER AGENT

2010 JUL 22 PM 12:00
 FILED FOR RECORD

Name _____
 Street _____
 City _____ State _____ Zip _____

F10-20963

In The county/court of Dade Court County

KNOWN ALL MEN BY THESE PRESENTS: That we, the above captioned defendant, as Principal, and Lexington National Insurance Corporation, a Maryland corporation, as Surety, are held and firmly bond unto the State of Florida, and its successors, to the penal sum of \$ 5,000 Dollars, for the payment whereof well and truly to be made we bind ourselves, our heirs, representatives, successors, and assigns, jointly and severally, firmly by these presents.

The condition of this obligation is such that if the said principal shall appear on T.B.S., 20 10 at _____ at the next regular or special term of the above captioned court only and shall submit to the said court to answer a charge of cocaine possession only and shall submit to orders and process of said court and not depart same without leave, then this obligation to be void, else to remain in full force and virtue.

SIGNED AND SEALED this 18 day of July, A.D., 20 10

Taken before me and approved by me: _____ (L.S.)
_____, Clerk/Sheriff

Timothy R. Ryan, Director
Corrections & Rehabilitation Department
By Miami Dade County, Florida

LEXINGTON NATIONAL INSURANCE CORPORATION
By _____ (L.S.)
(ATTORNEY-IN-FACTY (Surety) SACI)

STATEMENT OF THE BONDSMAN

I, THE UNDERSIGNED, AM A DULY LICENSED BAIL BONDSMAN and have registered for the current year with the office of the Clerk of Courts of the aforementioned county, and have filed a certified copy of my appointment by Power of Attorney for the Surety with the office of the Clerk of Court of the aforementioned county.

That the Principal named in the foregoing bond, of (Address) _____ has (given or promised to give) the sum of 500 (\$ 500) Dollars as consideration for the foregoing bond, filed with the Clerk of the above captioned Court, located in said County, together with the (promise or receipt) of security belonging to: _____

as follows: (detail description and source of collateral security) (if none, so state) P.N.I.A.

That a duly signed receipt has been given to the said principal for the consideration given and/or that the said indemnitor has (also been) given a receipt for the security described above.

Agent's Signature Dondee Bail Bonds
Agency Dondee Bail Bonds



2010-BB-018937

By the Original Power of Attorney will I this surety.

POWER OF ATTORNEY

LEXINGTON NATIONAL INSURANCE CORPORATION Power No. 2010-BB-018937
200 E. Lexington Street, Suite 501 • Baltimore, Maryland 21202 • 410-625-0800

THIS POWER OF ATTORNEY NULL AND VOID UNLESS USED BEFORE 1/1/11

BEFORE ALL MEN BY THESE PRESENTS, that LEXINGTON NATIONAL INSURANCE CORPORATION, a corporation duly organized and existing under the laws of the State of Maryland hereby constitutes and ratifies, subject to any General Qualifying Power of Attorney or other legal prerequisite, as its true and lawful attorney-in-fact the person signing below as Attorney-in-Fact, with full power and authority to sign in the name of the Company and affix its corporate seal to, and deliver on its behalf as surety, any and all obligations as herein provided, and the execution of such obligations in pursuance of these presents shall be as binding upon the Company as fully and to all intents and purposes as if done by the regularly elected officers of the Company at its home office in their own proper person; and the Company hereby ratifies and confirms all and whatsoever its attorney-in-fact may lawfully do and perform in the premises by virtue of these presents.

THE OBLIGATION OF THE COMPANY SHALL NOT EXCEED THE SUM OF ELEVEN THOUSAND DOLLARS (11,000.00). THIS POWER OF ATTORNEY IS VOID IF ALTERED OR REVOKED, VOID IF USED TO FURNISH BAIL ON THE SUBJECT BOND IN EXCESS OF THE STATED MAXIMUM AMOUNT OF THIS POWER AND VOID IF USED WITH OTHER POWERS OF THIS COMPANY OR OTHER POWERS OF OTHER COMPANIES TO MAKE BAIL ON THE SUBJECT BOND. EACH POWER OF ATTORNEY CAN ONLY BE USED ONCE AND MAY BE EXECUTED ONLY FOR RECOGNIZANCE ON CRIMINAL BAIL BONDS.

Amount: \$ 5,000
Defendant: Sohant Punjwani
Court Date: T.B.S. Case Number: F10020963
Defendant's Address: county/circuit County/City: Dade
Charge: cocaine/possession
Execution: 7-18-10 Court Assigned Agent #: 5921
Attorney-in-Fact: P. Martin 2
10-56754

NOT VALID FOR IMMIGRATION BONDS

IN WITNESS WHEREOF, LEXINGTON NATIONAL INSURANCE CORPORATION, by virtue of authority conferred by its Board of Directors, has caused these presents to be sealed with its corporate seal, signed by its President and attested by its Secretary this 9th day of April, 1998.

President: B. J. Ford
Secretary: Ann M. Miller



- 1. A separate Power of Attorney must be attached to each bond executed.
- 2. Powers of Attorney must not be returned to attorney-in-fact, but should remain a permanent part of court records.
- 3. The authority of such attorney-in-fact is limited to appearance bonds and cannot be construed to guarantee defendant's future lawful conduct, adherence to release conditions, travel limitations, payment of fines, restitution, or penalties, or any other conditions imposed by a court not specifically related to court appearance.