BROWARD COUNTY ARREST NO.

**SHADED FIELDS MUST BE ANSWERED IF DEFENDANT NOT IN CUSTODY**

OBTS. NO.

| FILING AGENCY | OFFENSE REPORT | LOCAL I.D. NO. | FDLE | FBI | SS NO. |
|---|---|---|---|---|---|
| DFS / Criminal Investigations Division | 25-1980 | | | | [redacted] |

| DEFENDANT'S LAST NAME | FIRST | MIDDLE | SUF | ALIAS/STREET NAME | CITIZENSHIP |
|---|---|---|---|---|---|
| Rhodes | Jazmine | Nicole | | | USA |

| R.C. | SEX | HGT. | WGT | HAIR | EYES. | COMP. | AGE | DOB | BIRTHPLACE | SCARS, MARKS, TT |
|---|---|---|---|---|---|---|---|---|---|---|
| B | F | 5'5" | | BLK | BRO | MED | 35 | [redacted] | Florida | |

| PERMANENT ADDRESS | LOCAL ADDRESS |
|---|---|
| [redacted] | Same |

| RESIDENCE TYPE: (1) CITY | (2) COUNTY | (3) FLORIDA | (4) OUT OF STATE | PLACE OF EMPLOYMENT | LENGTH |
|---|---|---|---|---|---|
| ☒ | ☐ | ☐ | ☐ | | Unk |

| HOW LONG DEFENDANT IN BROWARD COUNTY | BREATHALYZER BY/CCN | READING | PLACE OF ARREST | DATE/TIME ARRESTED | ARRESTING OFFICER(S) |
|---|---|---|---|---|---|
| Unknown | N/A | N/A | | | |

| OFFICER INJURED | UNIT | ZONE | BEAT | SHIFT | UNIT TRANSPORTING PRISONER | TRANSPORTING OFFICER/CCN | PICK-UP TIME- TIME ARRIVED AT BSO | DRUG TYPE |
|---|---|---|---|---|---|---|---|---|
| Y☐ N☐ | | | | | | | | |

TYPE: N-N/A, A-AMPHETAMINE, B-BARBITURATE, C-COCAINE, E-HEROIN, H-HALLUCINOGEN, M-MARIJUANA, 0-OPIUM, P-PARAPHERNALIA/ EQUIPMENT, S-SYNTHETIC, U-UNKNOWN, Z-OTHER

ACTIVITY: N-N/A, P-POSSES, S-SELL, B-BUY, T-TRAFFIC, A-SMUGGLE, D-DELIVER, E-USE, M- MANUFACTURE/ PRODUCE/ CULTIVATE, K-DISPENSE/ DISTRIBUTE, Z-ZONE

INDICATION OF: ALCOHOL INFLUENCE, DRUG INFLUENCE — Y ☐ ☐ N ☐ ☐ UNK ☐ ☐

ATTACH DEFENDANT'S PHOTO

DEFENDANT'S VEHICLE-MAKE TYPE YEAR COLOR

VEHICLE TOWED TO TAG NO. OTHER IDENTIFIERS OR REMARKS

| NAME OF VICTIM (IF CORPORATION, EXACT LEGAL NAME AND STATE OF INCORP.) | ADDRESS | PHONE # |
|---|---|---|
| Securian Financial | | |
| Other victims on file | | |

| COUNT NO. | OFFENSES CHARGED | CITATION # IF APPLICABLE | F.S. # OR CAPIAS/WARRANT # |
|---|---|---|---|
| 1-5 | INSURANCE FRAUD (Over 20K) | | 817.234-11b |
| 6-10 | UTTERING FORGED INSTRUMENTS | | 831.02 |
| 11 | CRIMINAL USE OF PERSONAL IDENTIFICATION | | 817.568-2a |
| 12-14 | CRIMINAL USE OF PERSONAL IDENTIFICATION – UNDER 18 YOA | | 817.568-6 |
| 15 | CRIMINAL USE OF PERSONAL IDENTIFICATION – BY PARENT | | 817.568-7 |
| 16 | ORGANIZED SCHEME TO DEFRAUD | | 817.034-4a2 |
| 17 | COMPUTER CRIME TO DEFRAUD OBTAIN PROPERTY | | 815.06-3b2 |

PROBABLE CAUSE AFFIDAVIT

An investigation conducted by the Florida Department of Financial Services, Criminal Investigations Division, Bureau of Insurance Fraud, established that defendant, Jazmin Rhodes, engaged in an ongoing course of conduct to defraud Securian Financial (Securian) by filing claims using altered medical records and an altered crash report. As a former employee of Memorial Healthcare System, the defendant sought to obtain reimbursement from her supplemental accident insurance policy with Securian.

The defendant filed one claim with Securian Financial using her minor son's personal identification information which resulted in an overpayment of $300.00. The defendant also filed three claims without the parents' consent for respective minor children, all under the age of 18, resulting in an overpayment of $18,220.00. The total overpayment the defendant received from those claims was $18,520.00.

In addition, the defendant endeavored to obtain $11,790.00 in reimbursement for a traffic crash where she claimed a broken leg, supporting this claim with an altered Florida Highway Patrol (FHP) traffic crash report and fraudulent medical records.

Supporting documents from Securian show the defendant filed claim# **H971996** for a right femur fracture in which the defendant claimed her minor son [redacted] suffered on October 2, 2023. In support of this claim, the defendant submitted an invoice from Miami-Dade Fire Rescue in which the actual patient "[redacted]' name was removed and replaced with her minor son's name "[redacted] on both the invoice and the medical records from Jackson Health System. The font was also changed on both the Miami-Dade Fire Rescue invoice and medical records. The defendant admitted in her sworn statement that she surreptitiously obtained a screenshot of [redacted] medical records without his mother, [redacted] knowledge, edited the doucmens by replacing [redacted] name with [redacted] name, and then submitted the altered documents to Securian. On

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November 22, 2023, Securian paid the defendant $9,630.00. Your Affiant obtained a sworn statement from the mother of minor child '[redacted] attesting she did not grant anyone permission to alter her minor son's medical records or file a claim for reimbursement.

In a sworn statement obtained by your Affiant, the defendant admitted to filing claim# **H994058** for a broken arm she claimed "[redacted]' suffered on March 29, 2024. The defendant stated she obtained the patient's Broward Health System medical records, edited them to remove the minor child's name and replace it with [redacted] name and personal identification information, and altered the font. Consequently, Securian paid Ms. Rhodes $2,130.00 on April 5, 2024. [redacted] parent of, '[redacted] advised in a sworn statement that she provided the defendant with her son's medical records only for a referral to another hospital and was not involved in any scheme to defraud Securian.

The defendant filed claim# **HA06821** with Securian Financial on behalf of her minor son, '[redacted] seeking reimbursement for a broken nose allegedly sustained on April 25, 2024. To make the claim compensable under the accident-only policy, the defendant admitted in a sworn statement that she altered [redacted] medical documents with Memorial Healthcare System. The purpose of this alteration was to conceal a chronic nasal condition to an acute/sudden injury.

The defendant filed claim # **HA13502** for a broken left arm that Ms. Rhodes claimed "[redacted] suffered on July 1, 2024. In support of her claim, she submitted medical records from Memorial Healthcare Systems, including Memorial Regional Hospital, Memorial Hospital West, and Joe DiMaggio Children's Hospital. [redacted] parent of "[redacted]" provided a sworn statement that she did not provide anyone with [redacted] medical records or give anyone permission to use his records in a claim. The defendant admitted in her sworn statement that she did not recall how she obtained [redacted] medical records. The defendant admitted that she did edit the records by removing [redacted] name and replacing his name with [redacted] name. The Defendant submitted the altered documents to Securian and was paid $6,460.00 on August 2, 2024.

The defendant also filed claim# **HA17847** with Securian, alleging she suffered a left tibia plateau fracture to her lower leg. In support of this claim, she submitted a traffic crash report from the Florida Highway Patrol (FHP) and medical records from Doctors' Hospital. During her sworn statement, the defendant was confronted with a fraudulent medical record. She admitted to possessing the original medical records belonging to [redacted] from Doctors' Hospital, despite not knowing [redacted]. The defendant reviewed the forged document and confessed to removing [redacted] name and replacing it with her own name, date of birth, and address before submitting the altered record to Securian.

Trooper Cole provided a sworn statement confirming he authored FHP crash report# FHPE19OFF045738 and that he did not alter the report or authorize anyone else to do so. Trooper Cole affirmed that the defendant was not the driver or a passenger in either vehicle involved in the traffic crash that occurred on March 29, 2019.

The parents of the minor children mentioned herein all provided sworn, recorded statements confirming they did not give the defendant permission to alter or use their children's medical records to support any claims.

Based on the totality of the evidence described above, your affiant believes probable cause exists that Jazmin Rhodes committed the aforementioned charges.

I swear the above statement is correct and accurate to the best of my knowledge and belief.

Det. Shelia Cain — OFFICER/AFFIANT'S SIGNATURE

Det. Shelia Cain / ID# 00653 — OFFICER'S NAME/CCN

DFS – Criminal Investigations Division — OFFICER'S DIVISION

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 13th day of NOVEMBER, 2025, who is personally known to me or who has produced (ID Type) as identification and who DID take an oath. (SEAL OR STAMP)
(Did or Did Not)

DEPUTY CLERK OF THE COURT, NOTARY PUBLIC, OR ASSISTANT STATE ATTORNEY

LT. / #00255 — TITLE OR RANK/CCN



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