

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000003425

**Entity Name:** PREMIUM JTA CORPORATION**Current Principal Place of Business:**3500 S. DUPONT HIGHWAY  
DOVER, DE 19901**Current Mailing Address:**3500 S. DUPONT HIGHWAY  
DOVER, DE 19901**FEI Number:** 68-0682751**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAW CENTER OF THE AMERICAS LLC  
201 S. BISCAYNE BLVD.  
SUITE 800  
MIAMI, FL 33131 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                        |
|-----------------|------------------------|
| Title           | D                      |
| Name            | VENEZIA, ANTONIO       |
| Address         | 3500 S. DUPONT HIGHWAY |
| City-State-Zip: | DOVER DE 19901         |

|                 |                        |
|-----------------|------------------------|
| Title           | D                      |
| Name            | DI STEFANO, TOMASO     |
| Address         | 3500 S. DUPONT HIGHWAY |
| City-State-Zip: | DOVER DE 19901         |

|                 |                        |
|-----------------|------------------------|
| Title           | D                      |
| Name            | GONCALVEZ, JORGE       |
| Address         | 3500 S. DUPONT HIGHWAY |
| City-State-Zip: | DOVER DE 19901         |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANTONIO VENEZIA**DIRECTOR****03/19/2013**

Electronic Signature of Signing Officer/Director Detail

Date