

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

5 MAY -1 PM 2:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **839264** (9)  
1. Corporation Name  
**ARAMARK UNIFORM SERVICES, INC.**

Principal Place of Business: **1101 MARKET ST. PHILADELPHIA PA 19101**  
Mailing Address: **P.O. BOX 13477 PHILADELPHIA PA 19101**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		09/30/1977		10/06/1994	
22		27		4. FEI Number		Applied For	
23		28		95-3082883		Not Applicable	
24		25		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
29		30		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
29		30		8. This corporation has liability for intangible tax under Florida Statutes			
29		30		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent


B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City FL B5 Zip Code

11. I, the undersigned, the principal officer of this corporation, do hereby certify, under the 7th Year, Florida Statutes, the above named corporation voluntarily has stated for the purpose of changing its registered office of record to the principal office of this corporation in the State of Florida. This change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am hereby sworn to do and to do the duties of the Secretary of State under the Florida Statutes.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CORPORATE OFFICERS AND DIRECTORS
<p><b>D</b> NAME: SUTHERLAND, L.F. STREET ADDRESS: 1101 MARKET ST. PHILADELPHIA PA 19101</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p><b>V</b> NAME: O'HARA, MICHAEL J. STREET ADDRESS: 1101 MARKET ST. PHILADELPHIA PA 19101</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p><b>DT</b> NAME: MAHONEY, MELVIN M. STREET ADDRESS: 1101 MARKET ST. PHILADELPHIA PA 19101</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p><b>D</b> NAME: TANZOLA, ANTHONY J. STREET ADDRESS: 1101 MARKET ST. PHILADELPHIA PA 19101</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p><b>P</b> NAME: LENWAY, A. FRED STREET ADDRESS: 1101 MARKET ST. PHILADELPHIA PA 19101</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p><b>S</b> NAME: BODNAR, PRISCILLA STREET ADDRESS: 1101 MARKET ST. PHILADELPHIA PA 19101</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 111.07(2)(b), Florida Statutes. I further certify that the information is accurate. This annual report or supplemental annual report is true and accurate and that my corporation shall have the same as reported. I do hereby make oath that any officer or director of this corporation who receives or transmits this report as required by Chapter 194, Florida Statutes, and that my name appears as the filer, or filer's agent, or as the preparer of this report, is duly sworn to do and to do the duties of the Secretary of State under the Florida Statutes.

SIGNATURE:  4/28/95 215-238-3162  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Michael J. O'Hara, Vice President**