


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 07, 2004 8:00 am**  
**Secretary of State**

05-07-2004 90120 005 \*\*\*550.00

<b>DOCUMENT # 809957</b>	
1. Entity Name ARAMARK EDUCATIONAL SERVICES, INC.	

Principal Place of Business 1101 MARKET ST. PHILADELPHIA, PA 19101	Mailing Address P.O. BOX 13477 PHILADELPHIA, PA 19101
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**24072848**



2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

04272004 Chg-P CR2E034 (10/03)

City & State	City & State		
Zip	Country	Zip	Country

4. FEI Number 23-1354443	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

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

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD AUSTELL, BARBARA <input checked="" type="checkbox"/> Delete 1101 MARKET ST. PHILADELPHIA, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TIMMINS, MEGAN <input type="checkbox"/> Delete 1101 MARKET ST. PHILADELPHIA, PA 19101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARINO, ALEXANDER <input type="checkbox"/> Delete 1101 MARKET ST. PHILADELPHIA, PA 19101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEONARD, WILLIAM <input type="checkbox"/> Delete 1101 MARKET ST PHILADELPHIA, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DONOVAN, JOHN <input checked="" type="checkbox"/> Delete 1101 MARKET STREET PHILADELPHIA, PA 19107
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D CHRISTOPHER HOLLAND <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1101 MARKET STREET PHILADELPHIA, PA 19107
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ELIZABETH CARTMELL <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1101 MARKET STREET PHILADELPHIA, PA 19107
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** ALEXANDER P. MARINO, VICE PRESIDENT **4/30/04** **215-238-3000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #