
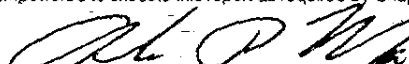


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED 6500
May 16, 2005 08:00 AM
Secretary of State

DOCUMENT # A33141 1. Entity Name ARAMARK MANAGEMENT SERVICES LIMITED PARTNERSHIP					
Principal Place of Business 2300 WARRENVILLE ROAD DOWNERS GROVE, IL 60515			Mailing Address 2300 WARRENVILLE ROAD DOWNERS GROVE, IL 60515		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 36-3797749	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH 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 <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and file if applicable</small>					
9. Capital Contributions as Shown on record. \$17,616,978.00			10. Amount of Capital Contributions in FLORIDA to date.		
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	M02000002078		STREET ADDRESS		
NAME	ARAMARK SMMS, LLC		CITY-ST-ZIP		
STREET ADDRESS	1101 MARKET STREET		STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA, PA 19107		CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS			STREET ADDRESS		
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CITY-ST-ZIP			CITY-ST-ZIP		
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.					
SIGNATURE: 			5/10/05 215-238-3162		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytime Phone #</small>		

ALEXANDER P. MARINO, VICE PRESIDENT, TAVES OF ARAMARK SMMS, LLC -
 GENERAL PARTNER OF ARAMARK MANAGEMENT SERVICES LIMITED PARTNERSHIP

STAPLE CHECK HERE