

**2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Oct 28, 2011  
Secretary of State**

DOCUMENT# 828149

Entity Name: AECOM SERVICES, INC.

**Current Principal Place of Business:**

515 SOUTH FLOWER STREET  
4TH FLOOR  
LOS ANGELES, CA 90071

**New Principal Place of Business:**

**Current Mailing Address:**

515 SOUTH FLOWER STREET  
4TH FLOOR  
LOS ANGELES, CA 90071

**New Mailing Address:**

FEI Number: 95-2084998      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PCEO  
Name: KONVICKA, ALBERT J  
Address: 1200 SUMMIT AVE, SUITE 320  
City-St-Zip: FORT WORTH, TX 76102

Title: SVP  
Name: MILLER, ROBYN  
Address: 515 SOUTH FLOWER STREET  
City-St-Zip: LOS ANGELES, CA 90071

Title: CFO  
Name: DESLATTI, DENNIS  
Address: 999 TOWN & COUNTRY ROAD  
City-St-Zip: ORANGE, CA 92868

Title: VP  
Name: KENYON, CRAIG W  
Address: 800 DOUGLAS ENTRANCE, 2ND FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

Title: AVP  
Name: BONILLA, JOSE EMILIO  
Address: 800 DOUGLAS ENTRANCE  
City-St-Zip: CORAL GABLES, FL 33134

Title: VP  
Name: HUNT, WILLIAM R  
Address: 800 DOUGLAS ENTRANCE, 2ND FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

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: ROBYN MILLER

SVP

10/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date