

**CDM-MOC-FORM Form: ANNEX 1**

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|--|----------------------------------|------------|
| <b>Date of submission</b>  |                                  | 23/04/2012 |
| <b>Section 1: Project Details</b>  |                                  |            |
| <b>1. Title of the CDM project activity</b>  | Cachoeirao CDM Project (JUN1092) |            |
| <b>2. Please state project ID Number if available</b>                              | 4788                             |            |
| <b>Section 2: List of project participants</b>                                     |                                  |            |
| <b>Name of the entity:</b><br>Hidrelétrica Cachoeirão S.A                          |                                  |            |
| <b>Party (country that authorised participation):</b><br>Brazil                    |                                  |            |
| <b>Contact details (primary authorised signatory):</b>                             | Mr.                              |            |
| Last name:<br>Bosi   | Telephone:                       |            |
| First name:<br>Angelo Andre  | Fax:                             |            |
| Email:   | Address:                         |            |
| Specimen signature:  |                                  |            |
| <b>Contact details (alternate authorised signatory):</b>                           |                                  |            |
| Last name:   | Telephone:                       |            |
| First name:  | Fax:                             |            |
| Email:   | Address:                         |            |
| Specimen signature:  |                                  |            |
| <b>Name of the entity:</b><br>Carbotrader Assessoria e Consultoria em Energia Ltda |                                  |            |
| <b>Party (country that authorised participation):</b><br>Brazil                    |                                  |            |
| <b>Contact details (primary authorised signatory):</b>                             | Mr.                              |            |
| Last name:<br>Clessie de Moraes  | Telephone:                       |            |
| First name:<br>Arthur Augusto  | Fax:                             |            |
| Email:   | Address:                         |            |
| Specimen signature:  |                                  |            |
| <b>Contact details (alternate authorised signatory):</b>                           |                                  |            |
| Last name:   | Telephone:                       |            |
| First name:  | Fax:                             |            |
| Email:   | Address:                         |            |
| Specimen signature:  |                                  |            |