

**Form: ANNEX 2**

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|--|--|------------------|
| <b>Date of submission</b>  |  | 28/03/2012       |
| <b>Section 1: Project Details</b>  |  |                  |
| <b>1. Title of the CDM project activity</b>  | Renkeng Hydropower Project, Longchuan County, Guangdong Province     |                  |
| <b>2. Please state reference number if available</b>   | 2392   |                  |
| <b>Section 4: Change of contact details (project participants or focal point entities)</b>   |  |                  |
| <b>The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:</b><br><input checked="" type="checkbox"/> Project Participant <input checked="" type="checkbox"/> Focal Point |  |                  |
| <b>Name of the entity:</b><br>Mitsubishi Corporation   |  |                  |
| <b>Party (country that authorised participation):</b><br>Japan   |  |                  |
| <b>Contact details (primary authorized signatory):</b>   | Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> |                  |
| Last name: Inada   | Telephone:   |                  |
| First name: Kazuo  | Fax:   |                  |
| Email:   | Address:   |                  |
| Specimen signature:  |  |                  |
|  |  |                  |
| <b>Contact details (alternate authorized signatory):</b>   | Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> |                  |
| Last name: Shimazu   | Telephone:   |                  |
| First name: Masataka   | Fax:   |                  |
| Email:   | Address:   |                  |
| Specimen signature:  |  |                  |
|  |  |                  |
| Signature(s) of designated focal point for scope (b):  |  | Date: .....      |
| Name: .....  |  | Signature: ..... |
| Only one primary or alternate signatory per focal point entity is required.  |  |                  |

**The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:**

☒ Project Participant

☐ Focal Point

**Name of the entity:**

Longchuan County Yuming Industrial Development Co., Ltd.

**Party (country that authorised participation):**

China

**Contact details (primary authorized signatory):**

Mr. ☒ Ms. ☐

Last name: Wang

Telephone:

First name: Hongwei

Fax:

Email:

Address:

Specimen signature:

**Contact details (alternate authorized signatory):**

Mr. ☐ Ms. ☐

Last name:

Telephone:

First name:

Fax:

Email:

Address:

Specimen signature:

Signature(s) of designated focal point for scope (b):

Date: .....

Name: .....

Signature: .....

Only one primary or alternate signatory per focal point entity is required.