

CDM-MOC-FORM Form: ANNEX 2

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------|
| Date of submission | | 09/02/2010 |
| Section 1: Project Details | | |
| 1. Title of the CDM project activity | Kaifeng Jinkai N2O Abatement Project | |
| 2. Please state project ID Number if available | 0837 | |
| Section 2: <u>Addition/change of name of a project participant</u> | | |
| <p>The following entity is hereby added as a project participant in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the <u>Statement of Agreement of the current modalities of communication.</u></p> | | |
| <p>Name of the entity: Henan Jinkai Chemical Industry Investment Holding Group Co., Ltd</p> | | |
| <p>Previous name of the entity: Kaifeng Jinkai Chemical Industry Co., Ltd</p> | | |
| <p>Party (country that authorised participation): China</p> | | |
| Contact details (primary authorized signatory): | Ms. | |
| Last name: Qiao | Telephone: | |
| First name: Chun Li | Fax: | |
| Email: Ms. | Address: | |
| Specimen signature: | | |
| | | |
| Contact details (alternate authorized signatory): | | |
| Last name: | Telephone: | |
| First name: | Fax: | |
| Email: | Address: | |
| Specimen signature: | | |
| | | |
| Signature(s) of designated focal point for addition of project participant and communication of voluntary withdrawal of project participants: | | |
| | | |
| Section 4: Change of contact details (project participants or focal point entities) | | |
| <p>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:</p> | | |

Name of the entity:

Henan Jinkai Chemical Industry Investment Holding Group Co., Ltd

Party (country that authorised participation):

China

Contact details (primary authorized signatory):

Ms.

Last name: Qiao

Telephone:

First name: Chun Li

Fax:

Email:

Address:

Ms.

Specimen signature:

Contact details (alternate authorized signatory):

Last name:

Telephone:

First name:

Fax:

Email:

Address:

Specimen signature:

Signature(s) of designated focal point for addition of project participant and communication of voluntary withdrawal of project participants: