

Form: ANNEX 2

Date of submission		08/06/2012
Section 1: Project Details		
1. Title of the CDM project activity	BRT Metroplus Medellin, Columbia	
2. Please state reference number if available	5618	
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>		
<input checked="" type="checkbox"/> Project Participant		<input checked="" type="checkbox"/> Focal Point
Name of the entity: METROPLUS S.A.		
Party (country that authorised participation): Colombia		
Contact details (primary authorized signatory):	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>	
Last name: Delgado	Telephone:	
First name: Maria del Pilar	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>	
Last name: Leyhdy	Telephone:	
First name: Silva	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.		