**Form: ANNEX 2**

| **Date of submission** | 08/02/2011 |
|---|---|
| **Section 1: Project Details** | |
| **1. Title of the CDM project activity** | Seguntor Bioenergy 11.5MW EFB Power Plant |
| **2. Please state reference number if available** | 0386 |

**Section 2: Addition/change of name of a project participant**

☐ **Add project participant**
☒ **Change name of project participant**
**The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.**

| | |
|---|---|
| **Name of the entity:**<br>Mitsubishi UFJ Morgan Stanley Securities Co., Ltd. | |
| **Party (country that authorised participation):**<br>Japan | |
| **Former name of project participant:**<br>Mitsubishi UFJ Securities Co., Ltd. | |
| **Contact details (primary authorized signatory):** | Mr.☒ Ms.☐ |
| Last name: Watanabe | Telephone: |
| First name: Hajime | Fax: |
| Email: | Address: |
| Specimen signature: | |
| **Contact details (alternate authorized signatory):** | Mr.☒ Ms.☐ |
| Last name: Toyofuku | Telephone: |
| First name: Masayuki | 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.

**Section 4: Change of contact details (project participants or focal point entities)**

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| **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:**<br>☒ Project Participant ☐ Focal Point | |
| **Name of the entity:**<br>Seguntor Bioenergy Sdn. Bhd. | |
| **Party (country that authorised participation):**<br>Malaysia | |
| **Contact details (primary authorized signatory):** | Mr.☒ Ms.☐ |
| Last name: Feng | Telephone: |
| First name: Andrew | Fax: |
| Email: | Address: |
| Specimen signature: | |
| **Contact details (alternate authorized signatory):** | Mr.☒ Ms.☐ |
| Last name: Atsuta | Telephone: |
| First name: Koichi | 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. | |

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| **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:**<br>☒ Project Participant ☒ Focal Point | |
| **Name of the entity:**<br>NES Japan Co., Ltd. | |
| **Party (country that authorised participation):**<br>Japan | |
| **Contact details (primary authorized signatory):** | Mr.☒ Ms.☐ |
| Last name: Ito | Telephone: |
| First name: Hideyuki | Fax: |
| Email: | Address: |
| Specimen signature: | |
| **Contact details (alternate authorized signatory):** | Mr.☒ Ms.☐ |
| Last name: Iokamori | Telephone: |
| First name: Nobuomi | 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. | |

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| **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:**<br>☒ Project Participant ☒ Focal Point | |
| **Name of the entity:**<br>Chubu Electric Power Co., Inc. | |
| **Party (country that authorised participation):**<br>Japan | |
| **Contact details (primary authorized signatory):** | Mr.☒ Ms.☐ |
| Last name: Kojima | Telephone: |
| First name: Mitsuhiro | Fax: |
| Email: | Address: |
| Specimen signature: | |
| **Contact details (alternate authorized signatory):** | Mr.☒ Ms.☐ |
| Last name: Kawamoto | Telephone: |
| First name: Tadashi | 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. | |