Form: ANNEX 2

Date of submission	15/05/2012
Section 1: Project Details	
1. Title of the CDM project activity	Feira de Santana Landfill Gas Project
2. Please state reference number if available	1626
Section 4: Change of contact details (project participants or focal point entities)	
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: Qualix Serviços Ambientai Ltda	
Party (country that authorised participation): Brazil	
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Bellini Trinchi	Telephone:
First name: Massimiliano	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Gelfi	Telephone:
First name: Marcel	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.	