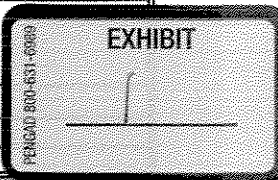


ACORD™ CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YY)
 6/28/2007

PRODUCER MARSH SALDAÑA	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED J&S DEVELOPMENT CORP. 58 SOUTH KIMBAL STREET BRADFORD, MASSACHUSSETS 01835	INSURERS AFFORDING COVERAGE ACE INSURANCE COMPANY P O BOX 191249 SAN JUAN, PR 00919-1249
	A B C



COVERAGES
 THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> _____ <input type="checkbox"/> _____ GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	95PR201391	8/14/2006	8/14/2007	EACH OCCURRENCE \$1,000,000.00 FIRE DAMAGE (Any one fire) \$ 100,000.00 MED EXP (Any one person) \$ 5,000.00 PERSONAL ADV INJURY \$ 1,000,000.00 GENERAL AGGREGATE \$ 2,000,000.00 PRODUCTS-COMP/OP AGG INCLUDED
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> _____				COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> _____				AUTO ONLY - EA ACCIDENT OTHER THAN EA ACC AUTO ONLY : AGG
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION	47PR700048	8/14/2006	8/14/2007	EACH OCCURRENCE \$ 3,000,000.00 AGGREGATE \$ 3,000,000.00 RETENTION \$ 10,000.00
X	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS LIABILITY <input type="checkbox"/> STOP GAP	95PR201391	8/14/2006	8/14/2007	<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000.00 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000.00 E.L. DISEASE - POLICY LIMIT \$ 1,000,000.00
X	OTHER <input checked="" type="checkbox"/> EMPLOYEE BENEFITS LIABILITY	95PR201391	8/14/2006	8/14/2007	EACH CLAIM AND AGGREGATE LIMIT \$ 1,000,000.00

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLE/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

CERTIFICATE HOLDER [XXX] ADDITIONAL INSURED INSURER LETTER []	CANCELLATION
CERTIFICATE HOLDER & ADDITIONAL INSURED: CANOPY ECOTERRA 800 RH TODD, SUITE 221 SANTURCE, PR 00907	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. ACE INSURANCE COMPANY
JR/mmc	

IMPORTANT
 If the certificate holder is an ADDITIONAL INSURED, the policy(es) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement (s). If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement (s).

DISCLAIMER
 This certificate of insurance does not constitute a contract between the issuing insurer (s), authorized representative or producer, and the certificate holder nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

HOLD HARMLESS AGREEMENT

ISSUED TO: **CANOPY ECOTERRA**

THE CONTRACTOR, FOR ITSELF, AGENTS EMPLOYEES, SUCCESSOR AND ASSIGNS AGREES TO SAVE AND HOLD HARMLESS THE OWNER FROM AND AGAINST ANY AND ALL CLAIMS, DEMANDS AND/OR SUITS WHETHER JUDICIAL OR EXTRA JUDICIAL FOR ANY COST WHATEVER ARISING OUT OR RELATED TO THE EXECUTION OF THE CONTRACT DESCRIBED BELOW, AND ITS INSURERS SHALL DEFEND THE OWNER FROM SUCH CLAIMS, DEMANDS AND/OR SUITS AND SHALL BEAR ALL THE EXPENSES FOR SUCH DEFENSE CONTEMPLATED WITHIN THE COVERAGE AND LIMITS PROVIDED BY THIS POLICY EXCEPT WHERE SUCH CLAIMS, DEMANDS AND/OR SUITS ARE DUE SOLELY TO THE NEGLIGENCE OF

**CANOPY ECOTERRA
(OWNER)**

ITS OFFICERS, AGENTS AND/OR EMPLOYEES. THIS ENDORSEMENT DOES NOT EXTEND, MODIFY, INCREASE LIMITS OF OR OTHERWISE ALTER THE COVERAGE PROVIDED BY THIS POLICY.

ADDITIONAL INSURED

IT IS UNDERSTOOD AND AGREED THAT:

CANOPY ECOTERRA

IS INCLUDED IN THIS POLICY AS AN ADDITIONAL INSURED.

THIRTY (30) DAYS CANCELLATION NOTICE

IT IS HEREBY UNDERSTOOD AND AGREED THAT IN THE EVENT OF CANCELLATION OF THE POLICY THIRTY (30) DAYS WRITTEN NOTICE SHALL BE GIVEN TO:

CANOPY ECOTERRA

PRIOR SAID CANCELLATION BECOMES IN EFFECT. THIS WILL APPLY ONLY ON CANCELLATION REQUESTED BY THE COMPANY FOR OTHER REASONS THAN NON-PAYMENT OF PREMIUM. ADDITIONAL PREMIUM DUE OR INSTALLMENTS DUE UNDER ANY PREMIUM FINANCING AGREEMENT. UNDER ABOVE CIRCUMSTANCES ONLY TEN (10) DAYS MODIFICATIONS WILL GIVEN, AS PER POLICY CONDITIONS.

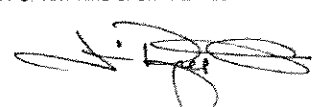
NAMED INSURED: J&S DEVELOPMENT CORP

POLICY NUMBER: 95PR201391; 47PR700048

ACE INSURANCE COMPANY

A handwritten signature in black ink, appearing to be a stylized name, possibly "J. S. Development Corp.", written over a horizontal line.

AUTHORIZED SIGNATURE

ACORD™ CERTIFICATE OF LIABILITY INSURANCE					DATE (MM/DD/YY) 3/6/2007	
PRODUCER MARSH SALDAÑA			THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW			
INSURED J&S DEVELOPMENT CORP. 58 SOUTH KIMBAL STREET, BRADFORD MASSACHUSETTS 01835			INSURERS AFFORDING COVERAGE ACE INSURANCE COMPANY P O BOX 191249 SAN JUAN, PR 00919-1249			
			A B			
COVERAGES						
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.						
INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
X	GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [] CLAIMS MADE [X] OCCUR [] _____ [] _____ GEN'L AGGREGATE LIMIT APPLIES PER [] POLICY [] PROJECT [] LOC	95PR201391	8/14/2006	8/14/2007	EACH OCCURRENCE	\$1,000,000.00
					FIRE DAMAGE (Any one fire)	\$ 100,000.00
					MED EXP (Any one person)	\$ 5,000.00
					PERSONAL ADV INJURY	\$ 1,000,000.00
					GENERAL AGGREGATE	\$ 2,000,000.00
					PRODUCTS-COMP/OP AGG	INCLUDED
	AUTOMOBILE LIABILITY [] ANY AUTO [] ALL OWNED AUTOS [] SCHEDULED AUTOS [] HIRED AUTOS [] NON-OWNED AUTOS [] _____				COMBINED SINGLE LIMIT (Ea accident)	
					BODILY INJURY (Per person)	
					BODILY INJURY (Per accident)	
					PROPERTY DAMAGE (Per accident)	
	GARAGE LIABILITY [] ANY AUTO [] _____				AUTO ONLY - EA ACCIDENT	
					OTHER THAN EA ACC	
					AUTO ONLY : AGG	
X	EXCESS LIABILITY [] OCCUR [] CLAIMS MADE [X] UMBRELLA FORM [] DEDUCTIBLE [] RETENTION	47PR700048	8/14/2006	8/14/2007	EACH OCCURRENCE	\$ 3,000,000.00
					AGGREGATE	\$ 3,000,000.00
					RETENTION	\$ 10,000.00
X	[] WORKERS COMPENSATION AND EMPLOYERS LIABILITY [] STOP GAP	95PR201391	8/14/2006	8/14/2007	[] WC STATUTORY LIMITS [] OTHER	
					E.L. EACH ACCIDENT	\$ 1,000,000.00
					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000.00
					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000.00
X	OTHER [X] EMPLOYEE BENEFITS LIABILITY	95PR201391	8/14/2006	8/14/2007	EACH CLAIM AND AGGREGATE LIMIT	\$ 1,000,000.00
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLE/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS WITH RESPECT TO: PROYECTO: CEMEX DE PONCE, CARR. 123 KM. 8.2 ANTIGUA #10 PONCE, PR 00731						
CERTIFICATE HOLDER [XXX] ADDITIONAL INSURED [] INSURER LETTER []					CANCELLATION	
CERTIFICATE HOLDER: CEMEX DE PONCE P O BOX 331349 PONCE PR 00733-1349					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. 	
ADDITIONAL INSURED: AMERICAN WASTE MANAGEMET & RECYCLING LLC						
JR/mmc					ACE INSURANCE COMPANY	
IMPORTANT						
If the certificate holder is an ADDITIONAL INSURED, the policy(es) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement (s). If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement (s).						
DISCLAIMER						
This certificate of Insurance does not constitute a contract between the issuing insurer (s), authorized representative or producer, and the certificate holder nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.						