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FLORIDA DIVISION OF CORPORATIONS

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TO: DIVISION OF CORPORATIONS
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FAX #:

FROM: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
075350000353

ACCT#:

CONTACT: CATHY LEACH

PHONE: (212)431-5000

FAX #:

(212)431-5111

NAME: CANAL MONEY TRANSFER CORPORATION

AUDIT NUMBER.....H98000009953

DOC TYPE.....FOREIGN PROFIT QUALIFICATION

CERT. OF STATUS..0

PAGES..... 4

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DIVISION OF CORPORATIONS

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE
STATE OF FLORIDA:

1. Canal Money Transfer Corporation
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. New York 3. 13-3635215
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. November 5, 1991 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Anticipate November 1998
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
7. 350 Fifth Avenue, Suite 1729
New York, NY 10118
(Current mailing address)

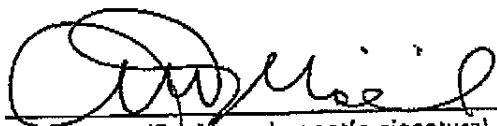
8. Provision of home remittance services to consumers
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: BlumbergExcelsior Corporate Services
Office Address: 4435 Old Winter Garden Road
Orlando, Florida, 32802
(Zip Code)

10. Registered agent acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature) (Officer)

Marc D. Moel, Assistant Secretary
(Type Name and Title of Officer)

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11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: Mohamed Ashraf Glasswala

Address: 48-45 41st Avenue
Sunny Side, NY 11104

Vice Chairman: _____

Address: _____

Director: Mohamed Ashraf Glasswala

Address: 48-45 41st Avenue
Sunny Side, NY 11104

Director: Amberine M. Glasswala

Address: 48-45 41st Avenue
Sunny Side, NY 11104

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B. OFFICERS

President: Mohamed Ashraf Glasswala

Address: 48-45 41st Avenue
Sunny Side, NY 11104

Vice President: _____

Address: _____

Secretary: Amberine M. Glasswala

Address: 48-45 41st Avenue
Sunny Side, NY 11104

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Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Mohamed Ashraf Glaswala, President
(Typed or printed name and capacity of person signing application)

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State of New York Department of State

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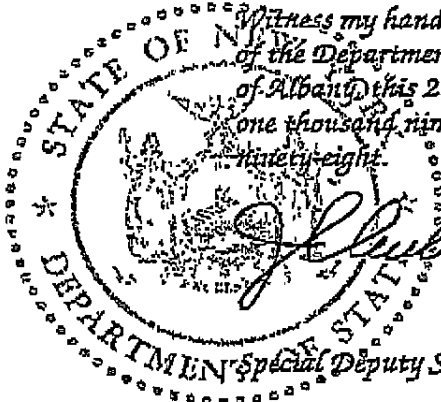
I hereby certify, that the certificate of incorporation of CANAL MONEY TRANSFER CORPORATION was filed on 11/05/1991, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation. I further certify the following:

A Biennial Statement was filed 01/07/1997.

The Corporation Biennial Statement is past due.

I further certify, that no other certificates have been filed by such corporation.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 26th day of May
one thousand nine hundred and
ninety-eight.



[Signature]
Special Deputy Secretary of State

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Blumberg Excelsior
62 White St
NY, NY 10013
212-431-5000

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