

FOR TTB USE ONLY
TTB ID
08182-000-000056

DEPARTMENT OF THE TREASURY
ALCOHOL AND TOBACCO TAX AND TRADE BUREAU
APPLICATION FOR AND CERTIFICATION/EXEMPTION OF
LABEL/BOTTLE APPROVAL
(See Instructions and Paperwork Reduction Act Notice Below)

1. REP. ID. NO. (If any)
1333 R

2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required)
DSP-CA-15013

3. SOURCE OF PRODUCT (Required)
 Domestic Imported

4. SERIAL NUMBER (Required)
YEAR: 08 - 1121

5. TYPE OF PRODUCT (Required)
 WINE
 DISTILLED SPIRITS
 MALT BEVERAGES

6. BRAND NAME (Required)
LiQ

7. FANCIFUL NAME (If any)
Margarita

9. E-MAIL ADDRESS
dksalmon@aol.com

10. FORMULA/SOP NO. (If any)
1

11. LAB. NO. & DATE/PRE-IMPORT NO. & DATE (If any)

12. NET CONTENTS
100 ML

13. ALCOHOL CONTENT
6.2% / VOL.

14. WINE APPELLATION (If on label)

15. WINE VINTAGE DATE (If on label)

16. PHONE NUMBER
502-589-4523

17. FAX NUMBER
502-589-0085

PART I - APPLICATION

8. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT REGISTRY, BASIC PERMIT, OR BREWER'S NOTICE. INCLUDE APPROVED DBA OR TRADENAME IF USED ON THE LABEL (Required)
Brothers International Desserts
1682 Kettering St.
Irvine, California 92614

8a. MAILING ADDRESS, IF DIFFERENT
Same

18. TYPE OF APPLICATION (Check applicable box(es))
a. CERTIFICATE OF LABEL APPROVAL
b. CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL
"For sale in _____ only" (Fill in State abbreviation)
c. DISTINCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE CAPACITY BEFORE CLOSURE _____
d. RESUBMISSION AFTER REJECTION
TTB ID _____

19. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, celloseals, corks, etc.) OTHER THAN THE LABELS AFFIXED BELOW, OR (b) BLOWN, BRANDED, OR EMBOSSED ON THE CONTAINER (e.g., net contents, etc.) THIS WORDING MUST BE NOTED HERE EVEN IF IT DUPLICATES PORTIONS OF THE LABELS AFFIXED BELOW. ALSO, PROVIDE TRANSLATIONS OF FOREIGN LANGUAGE TEXT APPEARING ON LABELS.

PART II - APPLICANT'S CERTIFICATION

Under the penalties of perjury, I declare: that all statements appearing on this application are true and correct to the best of my knowledge and belief; and, that the representations on the labels attached to this form, including supplemental documents, truly and correctly represent the content of the containers to which these labels will be applied. I also certify that I have read, understood, and complied with the conditions and instructions which are attached to an original TTB F 5100.31, Certificate/Exemption of Label/Bottle Approval.

20. DATE OF APPLICATION
06/11/08

21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT
David Salmon

22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT
David Salmon

PART III - TTB CERTIFICATE

This certificate is issued subject to applicable laws, regulations, and conditions as set forth in the instructions portion of this form.

23. DATE ISSUED
JUL 01 2008

24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU
Shelby Taylor

FOR TTB USE ONLY

QUALIFICATIONS
Entire Label

EXPIRATION DATE (If any)

AFFIX COMPLETE SET OF

REDUCED TO 50% OF SIZE



Color copy submitted