

OMB No. 1512-0092 (03/31/200)

ID	02276-003-000065	
CT	0299	OR 99 AP

DEPARTMENT OF THE TREASURY
BUREAU OF ALCOHOL, TOBACCO AND FIREARMS
APPLICATION FOR AND CERTIFICATION/EXEMPTION OF
LABEL/BOTTLE APPROVAL
(See Instructions and Paperwork Reduction Act Notice on Back)

PART I - APPLICATION

1. VENDOR CODE (Required)	2. SERIAL NUMBER (Required)	7. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT REGISTRY, BASIC PERMIT OR BREWER'S NOTICE (Required)			
0 0 6 0	YEAR 0 2 - 0 3	ADAMBA IMPORTS INTERNATIONAL, INC. 585 MESEROLE STREET BROOKLYN, NY 11237 NY-I-925			
3. BRAND NAME (Required) BAK'S ADVOCAT		7a. MAILING ADDRESS, IF DIFFERENT SAME			
4. CLASS AND TYPE (Required) (Includes wine varietal designation, if applicable) LIQUEUR					
5. FANCIFUL NAME (If any) N/A					
6. PLANT REGISTRY/BASIC PERMIT NO./BREWER'S NO. (Required) NY-I-925					
8. FORMULA NO. (If any) N/A	9. LAB. NO./DATE 120020515 5/17/02	10. NET CONTENTS 750 ML	11. PHONE NUMBER 7186289700	16. TYPE OF APPLICATION (Check applicable box)	
12. AGE (Distilled Spirits) N/A	13. ALCOHOL CONTENT 24%	14. VINTAGE (Wine products only, if stated on label) N/A	15. FAX NUMBER 7186280920	a. <input checked="" type="checkbox"/> CERTIFICATE OF LABEL APPROVAL	
17. 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) EMBOSSED ON THE CONTAINER. 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.		b. <input type="checkbox"/> CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL "For sale in only" (Fill in State abbreviation)			
		c. <input type="checkbox"/> DISTINCTIVE LIQUOR BOTTLE APPROVAL TOTAL BOTTLE CAPACITY BEFORE CLOSURE (Fill in amount)			

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 appear on the reverse of an original ATF F 5100.31, Certificate/Exemption of Label/Bottle Approval.

18. DATE OF APPLICATION 09/30/02	19. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT <i>Adam M. Bak</i>	20. TYPE NAME OF APPLICANT OR AUTHORIZED AGENT ADAM M. BAK, PRESIDENT
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PART III - ATF CERTIFICATE

21. DATE ISSUED OCT 16 2002	22. AUTHORIZED SIGNATURE, BUREAU OF ALCOHOL, TOBACCO AND FIREARMS <i>Shonda Hyman</i>
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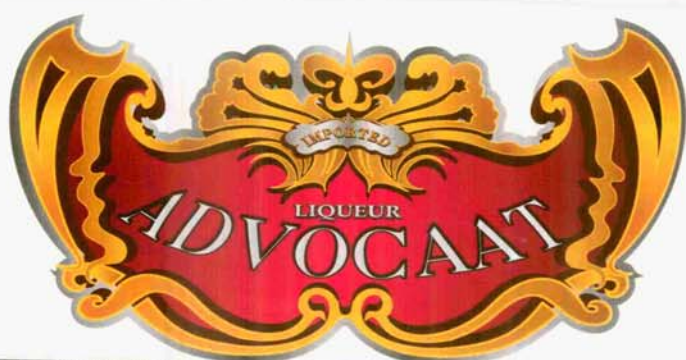
FOR ATF USE ONLY

QUALIFICATIONS

EXPIRATION DATE (If any)

AFFIX COMPLETE SET OF LABELS BELOW

THIS LABEL MUST APPEAR ON THE FRONT OF THE CONTAINER



ATF F 5100.31 (4-98) PREVIOUS EDITIONS ARE OBSOLETE