

DOCUMENTO DE OPERACIÓN PARA DESPACHO ADUANERO (DODA).

No. DE INTEGRACIÓN: 144068455

PATENTE O AUTORIZACIÓN: 3457

CÓDIGO DE BARRAS BIDIMENSIONAL

FECHA DE EMISIÓN: 2026-05-07 16:17:12

Nº TOTAL DE PEDIMENTOS Y/O AVISOS CONSOLIDADOS DE LA OPERACIÓN: 1

| CONTENEDORES/EQUIPO DE FERROCARRIL/Nº ECONÓMICO DEL VEHICULO: | CANDADOS | SECCIÓN ADUANERA DE DESPACHO: |
|---|----------|---|
| N530027 | | 240 NUEVO LAREDO, NUEVO LAREDO, TAMAULIPAS. |
| | | |
| | | |
| | | |



CADENA ORIGINAL: ||240|3457|1|6010490-COVE26833N5M8|144068455|N530027|N530027|2026-05-07 16:17:10||

FOLIO FISCAL DE CFDI CON COMPLEMENTO CARTA PORTE:

e7dab2e7-4c43-4e79-8f53-e1097fc66896

FIRMA DEL REPRESENTANTE LEGAL, AGENTE ADUANAL, AGENCIA ADUANAL O APODERADO:

Nº DE SERIE DEL CERTIFICADO: 00001000000516027867

SELLO DIGITAL: mD8WKF6BRM1nGVfBbJzguTGAT+m9s4pBJAop1i3u2rjaSOGY3rxGspNjz7VHQyg4 1Tsr2gMPJFcJeINtkIP9p7N66lZqg+lElDy+vyc8J/Rw13bSHpTUTSI9wjOSOTM TpNi0do8vK2mbgK800bmWDbeGtJZFCaZMyHegm3hT3yOfHDipzcpJb6Y854vNd36 BqT9VD5NHal4rPMXqH/vJ3xyugye4SyNzDRXFiS7ofbKTqryT3W39Mm9b8UK4VX/ aOtmSxZXGrSyxmiKksZcFtcBFfH0pLMrFltpLPCPHO/7cP8xyJGCewhvgk4rr0u rw03nmO8JStr/7c9e1uRGA==

SELLO DEL SAT:

Nº DE SERIE DEL CERTIFICADO: 20000108888800000041

SELLO DIGITAL: JqwXyDYEPFTdX4K+KGIINik0k+tQNmcdVYhh+x2naACLkWghZITzZZcaS7SmQO5SB73L pRa6OpwmmnI9mCy3Qompcygz5pfr/DS Kd6BCFLTmSm6c1Sr32GyAF0gVR4kr27Y9IVwHKX 1pqo6Y05YpbQLS/Qdz9ouvnkBBBatOsss=

5/18/20

EA 26/1/377

9:44

3044

N530027

EP

DECLARO BAJO PROTESTA DE DECIR VERDAD, EN LOS TÉRMINOS DE LO DISPUESTO POR EL ARTÍCULO 81 DE LA LEY, REPRESENTANTE LEGAL, AGENTE ADUANAL, AGENCIA ADUANAL O APODERADO.

EDUARDO MARTINIANO VILLARREAL DELGADO

*La fecha y hora de emisión corresponden a la hora centro del país.

REPORTE DIARIO DE CRUCES DE EXPORTACION DETALLADOS

Nuevo Laredo, Tamaulipas a 8 de mayo del 2026

Unidad: T1622

Operador: 07131 MENDOZA SANTOS REYNALDO



Puente Colombia

Puente Nuevo Laredo

Remolque: C/N530027 Compañía: TT

Cliente: INNOVATIVOS

Reparto 1 : JB HUNT LT --> 9002 KILLAM INDUSTRIAL BLVD

No. de Pedimentos: 1

Pedimentos: 34576010490

Observaciones: CAJA EN:INNOVATIVOS / SOLICITAR FIRMA Y SELLO EN EL DODA / MANDAR POD


Firma del Operador quien Recibe

Papeles e Instrucciones

Firma de quien Recibe

la Caja en Destino

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

OMB Control Number 1651-0001
Expiration Date: 02/28/2019

**INWARD CARGO MANIFEST FOR VESSEL UNDER
FIVE TONS, FERRY, TRAIN, CAR, VEHICLE, ETC.**

CBP Manifest/In Bond Number
EH7-0313180-3

(INSTRUCTIONS ON
REVERSE)

19 CFR 123.4, 123.7, 123.61

Page No. **1/1**

| | | | | |
|--|--|---|--|--|
| 1. Name or Number and Description of Importing Conveyance N530027 | | 2. Name of Master or Person in Charge | | |
| 3. Name and Address of Owner INDUSTRIALIZADORA DE FRUCTANOS TIERRA BLANCA CARRETERA TEPATITLAN KM 25 TEPATITLAN DE MORELOS, JAL 47600 | | 4. Foreign Port of Lading World Trade Bridge | 5. U.S. Port of Destination 2304 LAREDO, TX | |
| 6. Port of Arrival | | 7. Date of Arrival 05/06/26 | | |

| Column No. 1 | Column No. 2 | Column No. 3 | Column No. 4 | Column No. 5 |
|---|-------------------------------|--|-------------------------------|---------------------|
| Bill of Lading or Marks & Numbers or Address of Consignee on Packages | Car Number and Initials | Numbers and Gross Weight (in kilos or pounds) of Packages and Description of Goods | Name of Consignee | For Use by CBP only |
| INV#: G/26/0413 IMXAEH703131803 3934 CYPRESS CREEK STE 201 HOUSTON, TX 77068 | N530027 PKWY | 14 TOTES 19,741 KGS AGAVE SYRUP INVOICE VALUE: \$39,690.00 S 122-EXCLUSION, MEXICO USMCA FRUCT, >50% WT FRU, SYRU, OTHER FDA PNC: 268203608536 36BHB99 05/06/26 19:58 FDA PNC: 268203608540 36BHB99 05/06/26 19:58 | AYTON ENTERPRISES, LLC | |
| | | PREFILE ENTRY EH7-0313180-3  *** CERTIFIED: 05/06/26 6:53 PM *** | | |
| <div style="border: 1px solid black; padding: 5px;"> CARRIER: INTER MEXICANA DE TRANSPORTE S A DE FILER CODE PAPS: IMXAEH703131803 EH7  </div> | | | | |
| | | CISCO U.S. CUSTOMS BROKERS, L.L.C. (REF: FTBD-1033) LAREDO, TX 78045 Phone: 9567290693 | | |

CARRIER'S CERTIFICATE

To the Port Director of CBP, Port of Arrival:

The undersigned carrier hereby certifies that CISCO U.S. CUSTOMS BROKERS, L.L.C. of LAREDO, TX 78045

is the owner or consignee of such articles within the purview of section 484, Tariff Act of 1930.

I certify that this manifest is correct and true to the best of my knowledge.

Date 05/06/26 Master or Person in charge _____
(Signature)



DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

OMB CONTROL NUMBER 1651-0022
EXPIRATION DATE 02/28/2026

ENTRY SUMMARY

| | | | | | | | | | | | | | | | |
|--|--|---------------------------|------------------|---|-----------------|------------------------------|--------------------------------|--|----------------------------|--|---------------------|-----------------------------|--------------------------------|--------|--|
| 1. Filer Code/Entry Number EH7-0313180-3 | | 2. Entry Type 01 ABI/A | | 3. Summary Date 05/18/26 | | 4. Surety Number 856 | | 5. Bond Type 8 | | 6. Port Code 2304 | | 7. Entry Date 05/06/26 | | | |
| 8. Importing Carrier IMXA | | | | 9. Mode of Transport 30 | | | | 10. Country of Origin MX | | | | 11. Import Date 05/06/26 | | | |
| 12. B/L or AWB Number IMXA EH703131803 | | | | 13. Manufacturer ID MXINDE25TEP | | | | 14. Exporting Country MX | | | | 15. Export Date 05/06/26 | | | |
| 16. I.T. Number | | | 17. I.T. Date | | | 18. Missing Docs | | | 19. Foreign Port of Lading | | | 20. U.S. Port of Unlading | | | |
| 21. Country of Melt and Pour | | | | | | 22. Primary Country of Smelt | | | | | | | | | |
| 23. Secondary Country of Smelt | | | | | | 24. Country of Cast | | | | | | | | | |
| 25. Location of Goods/G.O. Number V641 | | | | 26. Consignee Number 242304-09525 | | | | 27. Importer Number 252304-10020 | | | | 28. Reference Number | | | |
| 29. Ultimate Consignee Name (Last, First, M.I.) and Address AYTON ENTERPRISES, LLC Street: 3934 CYPRESS CREEK PKWY STE 201 Destination: TX City: HOUSTON | | | | | | | | | | 30. Importer of Record Name (Last, First, M.I.) and Address INDUSTRIALIZADORA DE FRUCTANOS TIERRA BLANCA Street: CARRETERA TEPATITLAN KM 25 City: TEPATITLAN DE MORELOS State: FN Zip: 47600 MX | | | | | |
| 31. Line No. | 32. Description of Merchandise | | | | | | 36. | | 37. | | 38. | | | | |
| | | | | | | | A. Entered Value | | A. HTSUS Rate | | Duty and IR Tax | | | | |
| | 33. | | 34. | | 35. | | B. CHGS | | B. AD/CVD Rate | | Dollars | Cents | | | |
| | A. HTSUS No. | | A. Gross Weight | | Net Quantity in | | C. Relationship | | C. IRC Rate | | | | | | |
| | B. AD/CVD No. | | B. Manifest Qty. | | HTSUS Units | | D. Visa Number | | D. Visa Number | | | | | | |
| 001 | S 122-EXCLUSION, MEXICO USMCA 9903.03.08 FRUCT,>50% WT FRU,SYRU,OTHER S 1702.60.4050 19,741 KG 17,766.90 KG | | | | | | 14 TOTES | | FREE | | \$0.00 | | | | |
| | | | | | | | \$39,690 | | FREE | | \$0.00 | | | | |
| | | | | | | | C \$300 | | | | | | | | |
| | | | | | | | N | | | | | | | | |
| | Totals for Invoice C/26/0413 | | | | | | Invoice Value 39,690.00 USD | | +/- MMV | | Exchange 1.00000 | | Entered Value 39,690.00 USD | | |
| | | | | | | | | | | | | | | | |
| Other Fee Summary (for Block 39) | | | | 39. Total Entered Value | | | | CBP USE ONLY | | | | TOTALS | | | |
| | | | | \$ 39,690 | | | | | | | | | | | |
| | | | | Total Other Fees | | | | A. LIQ Code | | B. Ascertained Duty | | 41. Duty | | \$0.00 | |
| | | | | \$ 0.00 | | | | REASON CODE | | C. Ascertained Tax | | 42. Tax | | | |
| 40. Declaration of Importer of Record (Owner or Purchaser) or Authorized Agent | | | | | | | | | | D. Ascertained Other | | 43. Other | | \$0.00 | |
| I declare that I am the <input type="checkbox"/> Importer of record and that the actual owner, purchaser, or consignee for CBP purposes is as shown above, OR <input checked="" type="checkbox"/> owner or purchaser or agent thereof. I further declare that the merchandise <input checked="" type="checkbox"/> was obtained pursuant to a purchase or agreement to purchase and that the prices set forth in the invoices are true, OR <input type="checkbox"/> was not obtained pursuant to a purchase or agreement to purchase and the statements in the invoices as to value or price are true to the best of my knowledge and belief. I also declare that the statements in the documents herein filed fully disclose to the best of my knowledge and belief the true prices, values, quantities, rebates, drawbacks, fees, commissions, and royalties and are true and correct, and that all goods or services provided to the seller of the merchandise either free or at reduced cost are fully disclosed. I will immediately furnish to the appropriate CBP officer any information showing a different statement of facts. | | | | | | | | | | E. Ascertained Total | | 44. Total | | \$0.00 | |
| 45. Declarant Name (Last, First, M.I.) CISCO U.S. CUSTOMS BROKERS, L.L.C. | | | | Title CISCO U.S. CUSTOMS BROKERS, L.L.C. | | | | Signature CISCO U.S. CUSTOMS BROKERS, L.L.C. | | | | Date 05/06/26 | | | |
| 46. Broker/Filer Information Name (Last, First, M.I.) and Phone Number CISCO U.S. CUSTOMS BROKERS, L.L.C. 9567290693 | | | | | | | | 47. Broker/Importer File Number 0313180 / FTBD-1033 | | | | | | | |

CISCO U.S. CUSTOMS BROKERS, L.L.C.

302 CROSSROADS ST., STE B
LAREDO, TX 78045
9567290693 Fax: 9567175821

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

OMB CONTROL NUMBER: 1651-0024
EXPIRATION DATE: 11/30/2025

ENTRY/IMMEDIATE DELIVERY

19 CFR 142.3, 142.16, 142.22, 142.24, 149.3

| HEADER INFORMATION | | | |
|---|--|--|---|
| 1. PORT OF ENTRY: 2304 | | 2. BOND TYPE: <input type="checkbox"/> Single Transaction Bond <input checked="" type="checkbox"/> Continuous Bond <input type="checkbox"/> No Bond Required | |
| | | 3. IMPORTER NUMBER: <input type="checkbox"/> IRS <input type="checkbox"/> SSN <input checked="" type="checkbox"/> CBP Assigned 252304-10020 | |
| 4. IMPORTER NAME AND ADDRESS: Name (Last, First, Middle Initial): INDUSTRIALIZADORA DE FRUCTANOS TIERRA BLANCA Street Address: CARRETERA TEPATITLAN KM 25 City: TEPATITLAN DE MORELOS State: JAL Zip Code: 47600 | | | |
| 5. ENTRY NUMBER: EH7-0313180-3 | | 6. BOND VALUE: 39,700 | 7. ENTRY VALUE: 39,690 |
| 8. CES: | | | |
| 9. ENTRY TYPE: 01 | | 10. ORIGINATING WHSE ENTRY NUMBER (For Entry Type 22 Only): | 11. SURETY CODE 856 |
| 12. PORT OF UNLADING | | 13. MODE OF TRANSPORTATION: <input type="checkbox"/> Air <input type="checkbox"/> Ocean <input type="checkbox"/> Rail <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Hand Carry <input type="checkbox"/> Pipeline <input type="checkbox"/> Other | 14. LOCATION OF GOODS (FIRMS): V641 WORLD TRADE BRIDGE |
| 15. G.O. NUMBER: | | 16. CONVEYANCE NAME/FTZ ZONE ID: | |
| HEADER REFERENCE INFORMATION | | | |
| 17. REFERENCE ID CODE: | | 18. REFERENCE ID NUMBER (max of 50 characters): 0313180 | |
| | | 19. Self Certification: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| HEADER PARTIES (MUST APPLY TO ENTIRE ENTRY; IF NOT, SKIP TO LINE INFORMATION) | | | |
| 20. HEADER PARTY TYPE: | 21. HEADER PARTY TYPE NAME (Last, First, Middle Initial) AND ADDRESS: | | 22. HEADER ID # (IF APPLICABLE) |
| <input type="checkbox"/> Manufacturer <input type="checkbox"/> Consignee <input type="checkbox"/> Buying Party <input checked="" type="checkbox"/> Selling Party | Name: INDUTSRIALIZADORA DE AGAVE TIERRA BLANCA SA DE CV Street Address: RANCHO TIERRA BLANCA KM 25 City: TEPATITLAN DE MORELOS State: Zip Code:45040 | | <input type="checkbox"/> IRS <input type="checkbox"/> SSN <input type="checkbox"/> CBP Assigned |
| <input type="checkbox"/> Manufacturer <input type="checkbox"/> Consignee <input checked="" type="checkbox"/> Buying Party <input type="checkbox"/> Selling Party | Name: AYTON ENTERPRISES, LLC Street Address: STE 201 City: HOUSTON State: TX Zip Code:77068 | | <input type="checkbox"/> IRS <input type="checkbox"/> SSN <input type="checkbox"/> CBP Assigned |
| <input type="checkbox"/> Manufacturer <input type="checkbox"/> Consignee <input type="checkbox"/> Buying Party <input type="checkbox"/> Selling Party | Name: Street Address: City: State: Zip Code: | | <input type="checkbox"/> IRS <input type="checkbox"/> SSN <input type="checkbox"/> CBP Assigned |
| <input type="checkbox"/> Manufacturer <input type="checkbox"/> Consignee <input type="checkbox"/> Buying Party <input type="checkbox"/> Selling Party | Name: Street Address: City: State: Zip Code: | | <input type="checkbox"/> IRS <input type="checkbox"/> SSN <input type="checkbox"/> CBP Assigned |
| CERTIFICATION | | 27. CBP USE ONLY | |
| I hereby make application for entry/immediate delivery. I certify that the above information is accurate, the bond is sufficient, valid, and current, and that all requirements of 19 CFR Part 142 have been met. | | <input type="checkbox"/> CBP examination required. <input type="checkbox"/> Other agency action required, namely: | |
| 23. SIGNATURE OF APPLICANT: | | <input type="checkbox"/> Entry rejected, because: | |
| 24. PHONE NUMBER: 9567290693 | | 25. DATE: 05/06/26 | |
| 26. BROKER OR OTHER GOVT. AGENCY USE | | | |
| Req. Exam at: Transfer By: Entry Bond [] Carrier Bond [] CHL Bond [] CFS Bond [] | | DELIVERY AUTHORIZED: | SIGNATURE: DATE: |

LINE INFORMATION

| | |
|--|--|
| 28. LINE 1 HTS CODE: 1. <u>99030308</u> 2. <u>1702604050</u> | 28A. Country of Mining: _____ <input type="checkbox"/> Disclaimed 28B. Country of Harvest: _____ 28C. Vessel Flag: _____ |
| 28D. Vessel Name: | 28E. Vessel International Maritime Organization (IMO) Number |

28F. Method of Harvest: _____

| | | |
|--|--|---|
| 29. HTS / COMMERCIAL / DESCRIPTION: <input checked="" type="checkbox"/> HTS Description: <u>FRUCT,>50% WT FRU,SYRU,OT</u> <input type="checkbox"/> Commercial/Invoice | 30. LINE ITEM QUANTITY: <u>17,766.9</u> | 31. FTZ FILING DATE: |
| 32. VALUE 1. _____ 2. <u>39,690</u> | 33. COUNTRY OF ORIGIN: <u>MX</u> | 34. ZONE STATUS: <input type="checkbox"/> P <input type="checkbox"/> N |
| 35. LINE PARTY TYPE: <input type="checkbox"/> Manufacturer <input type="checkbox"/> Consignee <input type="checkbox"/> Buying Party <input type="checkbox"/> Selling Party | 36. LINE NAME (Last, First, Middle Initial) AND ADDRESS: Name: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ | 37. LINE ID NUMBER, IF APPLICABLE: <input type="checkbox"/> IRS <input type="checkbox"/> SSN <input type="checkbox"/> CBP Assigned |

| | |
|--|--|
| 28. LINE 2 HTS CODE: 1. _____ 2. _____ | 28A. Country of Mining: _____ <input type="checkbox"/> Disclaimed 28B. Country of Harvest: _____ 28C. Vessel Flag: _____ |
| 28D. Vessel Name: | 28E. Vessel International Maritime Organization (IMO) Number |

28F. Method of Harvest: _____

| | | |
|--|--|---|
| 29. HTS / COMMERCIAL / DESCRIPTION: <input type="checkbox"/> HTS Description: _____ <input type="checkbox"/> Commercial/Invoice | 30. LINE ITEM QUANTITY: | 31. FTZ FILING DATE: |
| 32. VALUE 1. _____ 2. _____ | 33. COUNTRY OF ORIGIN: | 34. ZONE STATUS: <input type="checkbox"/> P <input type="checkbox"/> N |
| 35. LINE PARTY TYPE: <input type="checkbox"/> Manufacturer <input type="checkbox"/> Consignee <input type="checkbox"/> Buying Party <input type="checkbox"/> Selling Party | 36. LINE NAME (Last, First, Middle Initial) AND ADDRESS: Name: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ | 37. LINE ID NUMBER, IF APPLICABLE: <input type="checkbox"/> IRS <input type="checkbox"/> SSN <input type="checkbox"/> CBP Assigned |

| | |
|--|--|
| 28. LINE 3 HTS CODE: 1. _____ 2. _____ | 28A. Country of Mining: _____ <input type="checkbox"/> Disclaimed 28B. Country of Harvest: _____ 28C. Vessel Flag: _____ |
| 28D. Vessel Name: | 28E. Vessel International Maritime Organization (IMO) Number |

28F. Method of Harvest: _____

| | | |
|--|--|---|
| 29. HTS / COMMERCIAL / DESCRIPTION: <input type="checkbox"/> HTS Description: _____ <input type="checkbox"/> Commercial/Invoice | 30. LINE ITEM QUANTITY: | 31. FTZ FILING DATE: |
| 32. VALUE 1. _____ 2. _____ | 33. COUNTRY OF ORIGIN: | 34. ZONE STATUS: <input type="checkbox"/> P <input type="checkbox"/> N |
| 35. LINE PARTY TYPE: <input type="checkbox"/> Manufacturer <input type="checkbox"/> Consignee <input type="checkbox"/> Buying Party <input type="checkbox"/> Selling Party | 36. LINE NAME (Last, First, Middle Initial) AND ADDRESS: Name: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ | 37. LINE ID NUMBER, IF APPLICABLE: <input type="checkbox"/> IRS <input type="checkbox"/> SSN <input type="checkbox"/> CBP Assigned |

| BILL OF LADING INFORMATION (Use additional block below for a second Bill of Lading) | | | |
|---|---|---|---------------------|
| 38. <input type="checkbox"/> Non-AMS | 39. <input type="checkbox"/> Split Bill | 40. BOL TYPE: <input type="checkbox"/> In-Bond <input checked="" type="checkbox"/> Master <input type="checkbox"/> House <input type="checkbox"/> Regular/Simple | |
| 42. IN-BOND NUMBER: | | 43. BOL NUMBER: IMXA EH703131803 | 44. QUANTITY: 14 |
| 41. SCAC/CARRIER ID: IMXA | | 45. UNIT OF MEASURE: TOTES | |
| SECOND BILL OF LADING | | | |
| IN-BOND NUMBER: | | BOL TYPE: <input type="checkbox"/> In-Bond <input type="checkbox"/> Master <input type="checkbox"/> House <input type="checkbox"/> Regular/Simple | SCAC/CARRIER ID: |
| 46. VOYAGE/FLT/TRIP: | | BOL NUMBER: | QUANTITY: |
| 47. CONVEYANCE: | | 48. ARRIVAL DATE: 05/06/26 | |
| UNIT OF MEASURE: | | | |

| BILL OF LADING INFORMATION (Continuation) | | | |
|--|-------------|------------------|------------------|
| 1. BOL TYPE: <input type="checkbox"/> In-Bond <input type="checkbox"/> Master <input type="checkbox"/> House <input type="checkbox"/> Regular/Simple | | SCAC/CARRIER ID: | |
| IN-BOND NUMBER: | BOL NUMBER: | QUANTITY: | UNIT OF MEASURE: |
| 2. BOL TYPE: <input type="checkbox"/> In-Bond <input type="checkbox"/> Master <input type="checkbox"/> House <input type="checkbox"/> Regular/Simple | | SCAC/CARRIER ID: | |
| IN-BOND NUMBER: | BOL NUMBER: | QUANTITY: | UNIT OF MEASURE: |

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0024. The estimated average time to complete this application is 15 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 90 K Street, NE, Washington DC 20229.