2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004312

Entity Name: THE CUTTERS, INC.

FILED Apr 27, 2004 Secretary of State

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Current Principal Place of Business:			New Princ	New Principal Place of Business:		
7201 METRO BLVD MINNEAPOLIS, MN 55439						
Current Mailing Address:			New Maili	New Mailing Address:		
7201 METRO BLVD MINNEAPOLIS, MN 55439						
FEI Number:	38-2362065	FEI Number Applied For ()	FEI Number Not Appl	icable () Co	ertificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE, FL 32301 US						
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.						
SIGNATURE:						
	Electronic	Signature of Registered Agent		Date		
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () Delete FINKELSTEIN, PAUL 7201 METRO BLVD MINNEAPOLIS, MN 55439 OC		Title: Name: Address: City-St-Zip:	() Ch	ange () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete PEARCE, RANDY 7201 METRO BLVD MINNEAPOLIS, MN 55439 OC		Title: Name: Address: City-St-Zip:	() Ch	ange()Addition	
Title: Name: Address: City-St-Zip:	VS () Delete GROSS, BERT M 7201 METRO BLVD MINNEAPOLIS, MN 55439 OC		Title: Name: Address: City-St-Zip:	S (X) Ch BAKKEN, ERIC 7201 METRO BLVI MINNEAPOLIS, MN		
Title: Name: Address: City-St-Zip:	VAS (X) Delete BAKKEN, ERIC 7201 METRO BLVD MINNEAPOLIS, MN 55439		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T () Delete KOLATKAR, SHRINIVAS 7201 METRO BLVD MINNEAPOLIS, MN 55439		Title: Name: Address: City-St-Zip:	() Ch	ange()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIC BAKKEN S 04/27/2004