2003

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90735 007 ***150.00

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DOCUMENT # F94000004312

1. Entity Name
THE CUTTERS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7201 METRO BOULEVARD	7201 METRO BOULEVARD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MINNEAPOLIS, MN	City & State: MINNEAPOLIS, MN
Zip: 55439 Country:	Zip: 55439 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 38-2362065 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: NRAI SERVICES, INC.
Street Address (P.O. Box Number is Not Acceptable): 526 EAST PARK AVENUE
City: TALLAHASSEE FL Zip Code: 32301

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee Is $150.00
After May 1, Fee is $550.00
Amended UBR Is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD NAME PAUL FINKELSTEIN STREET ADDRESS 7201 METRO BOULEVARD CITY-ST-ZIP MINNEAPOLIS, MN 55439	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE VD NAME RANDY PEARCE STREET ADDRESS 7201 METRO BOULEVARD CITY-ST-ZIP MINNEAPOLIS, MN 55439	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE VS NAME BERT M. GROSS STREET ADDRESS 7201 METRO BOULEVARD CITY-ST-ZIP MINNEAPOLIS, MN 55439	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE VAS NAME ERIC BAKKEN STREET ADDRESS 7201 METRO BOULEVARD CITY-ST-ZIP MINNEAPOLIS, MN 55439	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE T NAME SHRINIVAS KOLATKAR STREET ADDRESS 7201 METRO BOULEVARD CITY-ST-ZIP MINNEAPOLIS, MN 55439	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Shrinivas Kolatkar 4-23-03 952-947-7777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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